## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M54780

(5)

KEY HOPE TRADING CORP.

FILED
Apr 29 1997 8:00am
Secretary of State

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Principal Place THE PLACE 280 CRANDON KEY BISCAYNE	BLVD 51	KEY BISC		38					
US		US	US			<ol> <li>Date Incorporated or Qualified 06/30/1987</li> </ol>	3a. Date of Last Report 05/01/1996		
21	lace of Business	<b>2a.</b> Mailm <b>26</b>	2a. Mailing Address 26			4. FEI Number 65-0010872	Applied For Not Applicable		
Suite, Apt.		Suite,	Suite, Apt. #, etc.			5. Certificate of Status Desired See Required \$8.75 Additional Fee Required			
City & Stat	e	City & <b>28</b>	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip 24	Country 25	7ip 29	29 30			8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes Yes No			
	9. Name and Address of Co	urrent Registered A	gent			10. Name and Address of New Re-	gistered Agent		
PAD	ILLA, MARIA			81	Name				
201	CRANDON BLVD . #111			82	Street Ac	dress (P.O. Box Number is Not Acceptab	ile)		
	BISCAYNE FL 33149			83					
				64	City		FL 85	Zip Code	
11. Pursuant office or r agent. I a SIGNATURE	to the provisions of Sections 607 registered agent, or both, in the similar with, and accept the or Signature, typed or printed hanc of register.					orporation submits this statement for the p ration's board of directors. I hereby accep	urpose of chang of the appointme	jing ils regis nt as registe	itered ered
12.	OFFICERS	AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICE		CTORS IN 1	2 8
TITLE	DP		DELETE	1.1 11116	-		Ch		Addition &
NAME	CADEMARTORI, HECTOR I	RAUL		1.2 NAME				·	
STREET ADDRESS	RIVERA INDARTE 1072			1.3 STREET	ADDRESS	•			
CITY-ST-ZIP	ACASSUSO - 1640 AR			1.4 City - 5					۶
TITLE	DV		DELETE	2.1 TOLE			☐ Ch	ange 🔲 A	Addition C
NAME	CADEMARTORI, GABRIEL	H		2.2 NAME				_	
STREET ADDRESS	2900 BIRD AVE., #7			2.3 STREE	ADDRESS				
CITY-ST-ZIP	COCONUT GROVE FL			2. 4 DITY-	ST-ZIP				
TITLE	DT		DELETE	3 1 TITLE			Ch	ange 🔲 A	Addition
NAME	DE PADILLA, MARIA DEL F	RC OF		3.2 NAME					
STREET ADDRESS	201 CRANDON BLVD., #1	11		3 3 STREFT	ADDRESS				
CITY-ST-ZIP	KEY BISCAYNE FL			34 CITY-	ST - ZIP				
TITLE			DELETE	4.1 71°LF			☐ Ch	ange 🔲 A	ddition
NAME				4. 2 NAME					i i
STREET ADDRESS				4.3 STRFF1	ADDRESS				
CITY-ST-ZIP				4.4 OHY- S	IT - ZIP	•			
TITLE			DELETE	51 TALE			☐ Ch	ange 🔲 A	ddition
NAME				5.2 NAME					
STREET ADDRESS	•			5.3 STREET	ADDRESS				
CITY-ST-ZIP				5.4 CHY-S					
TITLE			DELETE	6 1 THLE			☐ Ch	ange 🔲 A	ddition
NAME				62 NAME					
STREET ADDRESS				63 STREET	ADDRESS	· I			
CITY-ST-ZIP				64 0014-9					

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.