

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2004 8:00 am
Secretary of State

04-07-2004 90344 048 ***150.00

DOCUMENT # M72558

1. Entity Name
KEY FIRE HOSE CORPORATION



Principal Place of Business
1150 NW 72 STREET
MIAMI, FL 33150 US

Mailing Address
PO BOX 16600
PLANTATION, FL 33318 US

14001203



2. Principal Place of Business

3. Mailing Address

PO Box 530007

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01062004

Chg-P

CR2E034 (10/03)

City & State

City & State

MIAMI FL

Zip

Country

Zip

Country

33153-0007

USA

4. FEI Number

65-0035362

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GENTHNER, CHARLES S.
1150 NW 72 ST.
MIAMI, FL 33150

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	GENTHNER, CHARLES S.	
STREET ADDRESS	1150 NW 72 STREET	
CITY-ST-ZIP	MIAMI, FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	BERNHARDT, JAY G.	
STREET ADDRESS	115 METROPOLITAN DRIVE	
CITY-ST-ZIP	LIVERPOOL, NY	
TITLE	D	<input type="checkbox"/> Delete
NAME	ZYWICKI, ROBERT G.	
STREET ADDRESS	115 METROPOLITAN DRIVE	
CITY-ST-ZIP	LIVERPOOL, NY	
TITLE	D	<input type="checkbox"/> Delete
NAME	DONEGAN, LARRY	
STREET ADDRESS	1150 NW 72ND STREET	
CITY-ST-ZIP	MIAMI, FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	BELL, JERRY	
STREET ADDRESS	530 SAN PADRO DRIVE	
CITY-ST-ZIP	CHESAPEAKE, VA	
TITLE	D	<input type="checkbox"/> Delete
NAME	GENTHNER, TENA	
STREET ADDRESS	1150 NW 72 ST	
CITY-ST-ZIP	MIAMI, FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BELL, GERALD	
STREET ADDRESS	116 SNIPE COURT	
CITY-ST-ZIP	DUCK, NC 27949	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I 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 report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRESIDENT

01/06/04

Date

305-696-1680

Daytime Phone #