2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000073803

Name:

Address:

City-St-Zip:

CABRERA, ALEX

KEY WEST, FL 33040

50-D 11TH AVE

Entity Name: DIVERSIFIED SERVICES OF KEY WEST, INC.

FILED Apr 07, 2005 Secretary of State

•			,		
Current P	rincipal Pla	ce of Business:	New Principal Place	New Principal Place of Business:	
50-D 11TH KEY WES	HAVE T, FL 33040				
Current N	lailing Addr	ess:	New Mailing Address	New Mailing Address:	
50-D 11TH KEY WES	1 AVE T, FL 33040				
FEI Number	: 65-1036644	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	l Address of	Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
The above	T, FL 33040 named entit of Florida.		ne purpose of changing its registered	d office or registered agent, or both,	
		onic Signature of Registered	Agent	Date	
Election Ca	mpaign Financ	ing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD CABRERA, G 50-D 11TH A KEY WEST,	VE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD CABRERA, B 50-D 11TH A KEY WEST,	VE	Title: Name: Address: City-St-Zip:	() Change() Addition	
Title:	TD	() Delete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: GUDELIO CABRERA PRES 04/07/2005