2006 FOR PROFIT CORFORATION ANNUAL REPORT

DOCUMENT # P00000100692

1. Entity Name

INTERNET REALTY/FLORIDA KEYS, INC.



FILED Feb 09, 2006 08:00 AN Secretary of State

Principal Place of Business

24752 OVER SEAS HWY PERIWINKLE PLAZA SUMMERLAND KEY, FL 33042 Mailing Address

P.O. BOX 420148

SUMMERLAND KEY, FL 33042



DO NOT WRITE IN THIS SPACE

 01132006
 No Chg-P
 CR2E034 (11/05)

 4. FEI Number 65-1068358
 | Applied For | Not Applied

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MACLAREN, GREGORY 24752 OVER SEAS HWY, PERIWINKLE PLAZA SUMMERLAND KEY, FL 33042

DO NOT WRITE IN THIS SPACE

				** -		
	named entity submits this statement for the pions of registered agent.	Lurpose of changing its registere	d office or n	egistered agent, or b	oth, in the State of Florida. I am familiar with, and acce	
SIGNATURE	Signsture, typed or printed name of registered agent and title is	f applicable. (NOTE Registered	Agent signature	required when reinstating)	DATE	
	E NOWIII FEE IS \$150.00 ny 1, 2006 Fee will be \$550.00	Election Campaign Finan- Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS			· - ·	
TITLE Name Street adoress City-St-Zip	D MACLAREN, GREGORY 1315 UNITED ST KEY WEST, FL 33040		.000000426145 02/20/06-80031-005 150.00			
TITLE Name Street Address City-St-Zip			02/20/06-80031-005 150.00			
TITLE NAME Street address City-St-Zip				DO NOT WRITE		
TITLE Name Street address City-St-Zip			IN THIS SPACE			
TITLE NAME Street address City-St-Zip						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 changed, or on an attachment with an address, with all other like empowered.

CICNIATUDE.

Jan Warder