


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 02, 2005 08:00 AM
Secretary of State

DOCUMENT # P00000407993

1. Entity Name
 FERNWOOD KEY, INC.



Principal Place of Business
 3191 CORAL WAY
 403
 MIAMI, FL 33145 US

Mailing Address
 150 W. FLAGLER ST., #2200
 MIAMI, FL 33130

DO NOT WRITE IN THIS SPACE



08292005 No Chg-P CR2E034 (10/03)

4. FEI Number
 65-1065066

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

FREED, OWEN S
 150 W. FLAGLER ST., #2200
 MIAMI, FL 33130

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZUBILLAGA, JUAN LUIS URBANIZACION PRADO LARGO, CALLE CIPRES 50 POZUELO MADRID 28223, SPAIN,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS FREED, OWEN S 150 W. FLAGLER ST., #2200 MIAMI, FL 33130
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 09/07/05-80020-002 158.75

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 another like empowered.

SIGNATURE:  **305-781-3486**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #