2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000021911

1. Entity Name
KEY CONSTRUCTION OF THE BAHAMAS, INC.

Principal Place of Business	Mailing Address
126 YANCY CIRCLE SATSUMA, FL 32189	PO BOX 143 SATSUMA, FL 32189

2. Principal Place of Business - No P.O. Box #

3. Mailing Address
3 ALTCEN COURT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04032008   Chg-P   CR2E034 (12/06)

City & State

City & State
ORMOND BEACH, FLA

4. FEI Number
59-3728284

Applied For / Not Applicable

Zip	Country	Zip *32174*	Country	

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

6. Name and Address of Current Registered Agent

O'NEAL, PATRICK ESQ
2900 EAST OAKLAND PARK BLVD THIRD FLOOR
FORT LAUDERDALE, FL 33306

7. Name and Address of New Registered Agent

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, 2008 Fee will be $550.00

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

10.	OFFICERS AND DIRECTORS		**11.**	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KEY, ELVIS 126 YANCY CIRCLE SATSUMA, FL 32189	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition	

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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Elvis Key   ELVIS KEY   OWNER   04/3/08*

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