


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**7 Aug 15, 2006 8:00 am**  
**Secretary of State**

07-21-2006 90023 048 \*\*\*150.00  
 08-15-2006 90003 022 \*\*\*400.00

DOCUMENT # P01000042561			
1. Entity Name KEUVY CORPORATION			
Principal Place of Business 6600 N ANDREWS AVE SUITE 306 FT. LAUDERDALE, FL 33309		Mailing Address 6600 N ANDREWS AVE SUITE 306 FT. LAUDERDALE, FL 33309	
2. Principal Place of Business 3610 Yacht Club Dr.		3. Mailing Address 3610 Yacht Club Dr.	
Suite, Apt. #, etc. #1008		Suite, Apt. #, etc. #1008	
City & State Aventura, FL		City & State Aventura, FL	
Zip 33180	Country USA	Zip 33180	Country USA
4. FEI Number 37-1425692		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BLECKER, STEVEN 6600 N ANDREWS SUITE 306 FT. LAUDERDALE, FL 33309		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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 GUTTMAN, JAIME 6600 N ANDREWS AVE #306 FT. LAUDERDALE, FL 33309 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3565 Magellan Circle, #334 Aventura, FL 33180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUTTMAN, JORGE 6600 N ANDREWS AVE #306 FT. LAUDERDALE, FL 33309 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3610 Yacht Club Dr., #1008 Aventura, FL 33180
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: <i>[Signature]</i>		Date: July 19, 2006	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	

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