2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 22, 2008 08:00 AN Secretary of State **DOCUMENT # P01000060912** 1. Entity Name KEY BELL CORP. Principal Place of Business Mailing Address 8601 NW 81ST RD 9741 FOUTAINEBLEAU BLVD. #113 MIAMI, FL 33172 MIAMI, FL 33166 05152008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1113912 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CAMACHO, JAIME DO NOT WRITE 9741 FONTAINEBLEAU BLVD **APT 113** IN THIS SPACE MIAMI, FL 33172 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 9. Election Campaign Financing FILE NOW!!! FEE IS \$550.00 \$5.00 May Be Due by September 12, 2008 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS THIE CAMACHO, JAIME NAME 8601 NW 81ST RD, STE 1 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33166 U00000951983 06/04/08-80061-013 550.00 TITLE SVD CARRASCAL, JEANNETTE NAME STREET ADDRESS 8601 NW 81ST RD, STE 1 CITY-ST-ZIP MIAMI, FL 33166 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TOLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-71P

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:

IIILE

STREET ADDRESS CITY-ST-7IP

SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

Daytime Phone #