

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 07, 2003 8:00 am**  
**Secretary of State**

04-21-2003 91034 025 \*\*\*150.00

**DOCUMENT # P02000006174**

1. Entity Name  
**KEY FINANCIAL ESTATES INC.**



Principal Place of Business  
**199 OCEAN LANE DRIVE  
UNIT 305  
KEY BISCAYNE FL 33149**

Mailing Address  
**199 OCEAN LANE DRIVE  
UNIT 305  
KEY BISCAYNE FL 33149**

**55038526**



2. Principal Place of Business

3. Mailing Address

☐ CHECK HERE IF MAKING CHANGES

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**74-3060804**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BATLE, JOSE R  
199 OCEAN LANE DRIVE  
UNIT 305  
KEY BISCAYNE FL 33149**

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, 2003 Fee will be \$550.00  
Make Check Payable to Florida Department of State**

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  
BATLE, JOSE R  
199 OCEAN LANE DRIVE #305  
KEY BISCAYNE FL 33149** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
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CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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 exemption stated in Section 119.07(3)(i), 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:

**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4-18-03**

Date

Daytime Phone #

CR2E034 (10/02)

Attachment  
Doc # 1021000674  
55038524

AMOUNT OF DEPOSIT (Do NOT type, please print)

DOLLARS

CENTS

Mark the "X" in this box only if there is a change to Employer Identification Number (EIN) or Name.

See instructions on page 1.

BANK NAME/  
DATE STAMP

EIN 74-3060804 201012

KEY FINANCIAL ESTATES  
8504 S W 8TH ST  
MIAMI FL 33144-4053

IRS USE  
ONLY

TYPE OF TAX

<input type="checkbox"/> 941	<input type="checkbox"/> 945
<input type="checkbox"/> 990-C	<input type="checkbox"/> 1120
<input type="checkbox"/> 943	<input type="checkbox"/> 990-T
<input type="checkbox"/> 720	<input type="checkbox"/> 990-PF
<input type="checkbox"/> CT-1	<input type="checkbox"/> 1042
<input type="checkbox"/> 940	

PERIOD

<input checked="" type="checkbox"/> 1st Quarter
<input type="checkbox"/> 2nd Quarter
<input type="checkbox"/> 3rd Quarter
<input type="checkbox"/> 4th Quarter

62

FOR BANK USE IN MICR ENCODING

28 2

Telephone number ( )

Federal Tax Deposit Coupon  
Form 8109 (Rev. 12-2000)