

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000097425

FILED
Mar 06, 2003
Secretary of State

Entity Name: KEY WEST IMPORTS, INC.

Current Principal Place of Business:

2880 SW 42ND AVENUE
PALM CITY, FL 34990 US

New Principal Place of Business:

Current Mailing Address:

2880 SW 42ND AVENUE
PALM CITY, FL 34990 US

New Mailing Address:

FEI Number: 14-1845482

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHN, WELLS
4181 SW EGRET POND TERRACE
PALM CITY, FL 34990 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LAFRANCE, ANGELA
Address: 1507 S. UNIVERSITY DRIVE, STE. B
City-St-Zip: PLANTATION, FL 33324 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WELLS, JOHN
Address: 4181 SW EGRET POND TERRACE
City-St-Zip: PALM CITY, FL 34990 US

Title: V () Change (X) Addition
Name: WELLS, RENEE D
Address: 4181 SW EGRET POND TERRACE
City-St-Zip: PALM CITY, FL 34990 US

Title: S () Change (X) Addition
Name: WELLS, RENEE D
Address: 4181 EGRET POND TERRACE
City-St-Zip: PALM CITY, FL 34990 US

Title: D () Change (X) Addition
Name: WELLS, JOHN
Address: 4181 EGRET POND TERRACE
City-St-Zip: PALM CITY, FL 34990 US

Title: D () Change (X) Addition
Name: WELLS, RENEE D
Address: 4181 EGRET POND TERRACE
City-St-Zip: PALM CITY, FL 34990 US

Title: T () Change (X) Addition
Name: WELLS, JOHN
Address: 4181 EGRET POND TERRACE
City-St-Zip: PALM CITY, FL 34990 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN WELLS

P

03/06/2003

Electronic Signature of Signing Officer or Director

Date