## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 19, 2004 08:00 AM Secretary of State DOCUMENT # P02000114242 PETER A. LOCK & KEY, INC. Principal Place of Business Mailing Address 14250 SW 152 PLACE 14250 SW 152 PLACE MIAMI, FL 33196 MIAMI, FL 33196 04142004 No Cha-P GR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 14-1856767 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE GONZALEZ, JUAN C 14250 SW 152 PLACE MIAMI, FL 33196 IN THIS SPACE 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 life if applicable. (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOWILL FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 H00000119923 04/19/04-80116-020 OFFICERS AND DIRECTORS 10. TETLE ECHENIQUE, PEDRO NAME STREET ADDRESS 198 SW 103 AVE MIAMI, FL 33174 CSTY-ST-7IP TATLE NAME STREET ADDRESS City-ST-ZIP TIBLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TELLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MANE STREET ADDRESS CITY-ST-ZIP TIELE

12. I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or suppliemental report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director of the corporation by the received 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:

NAME STREET ADDRESS CITY-ST-ZIP

SIGN DUNE AND TYPED OR PRINTED NAME OF

1 PEDEO

Echenique

4/14/2004

**FILED** 

(305) <u>277-993</u>7

Daytime Phone #