

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000133213

FILED  
Apr 27, 2012  
Secretary of State

**Entity Name:** GB (KEY BISCAYNE) CORPORATION

**Current Principal Place of Business:**

801 BRICKELL AVENUE  
PH 2  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

801 BRICKELL AVENUE  
PH 2  
MIAMI, FL 33131

**New Mailing Address:**

**FEI Number:** 41-2076731

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD  
PLANTATION, FL 33324 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: ALIBHAI, KARIM  
Address: 801 BRICKELL AVENUE PH 2  
City-St-Zip: MIAMI, FL 33131

Title: VP  
Name: TOM, BEZOLD  
Address: 801 BRICKELL AVENUE PH 2  
City-St-Zip: MIAMI, FL 33131

Title: VP  
Name: LAKE, GARY  
Address: 801 BRICKELL AVENUE PH 2  
City-St-Zip: MIAMI, FL 33131

Title: S  
Name: BEZOLD, TOM  
Address: 801 BRICKELL AVE PH 2  
City-St-Zip: MIAMI, FL 33131

Title: VP  
Name: BIKULEGE, JUDI  
Address: 801 BRICKELL AVENUE PH 2  
City-St-Zip: MIAMI, FL 33131

Title: AS  
Name: LEVITT, JULIE  
Address: 801 BRICKELL AVENUE PH 2  
City-St-Zip: MIAMI, FL 33131

I hereby 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 all other like empowered.

SIGNATURE: TOM BEZOLD

VP

04/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date