

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000048090

Entity Name: ZOREF KEY SOLUTIONS, INC.

FILED  
Mar 26, 2009  
Secretary of State

## Current Principal Place of Business:

9241 SUNRISE LAKE BLVD.,  
206  
SUNRISE, FL 33322

## New Principal Place of Business:

## Current Mailing Address:

9241 SUNRISE LAKE BLVD.,  
206  
SUNRISE, FL 33322

## New Mailing Address:

FEI Number: 20-0092551

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LERNER, LAWRENCE  
9241 SUNRISE LAKE BLVD.,  
206  
SUNRISE, FL 33322 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: ZOREF, HAROLD  
Address: 131 MT AIRY ROAD SOUTH  
City-St-Zip: CROTON ON HUDSON, NY 10520

Title: VP ( ) Delete  
Name: LERNER, LAWRENCE I  
Address: 9241 SUNRISE LAKES BLVD  
City-St-Zip: SUNRISE, FL 33322

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: LAWRENCE I LERNER

VP

03/26/2009

Electronic Signature of Signing Officer or Director

Date