2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000066505

Entity Name: KEYNET CORP.

FILED Mar 23, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4361 SW 160 AVE 9615 NW 1ST CT SUITE 202 SUITE 101

MIRAMAR, FL 33027 US PEMBROKE PINES, FL 33024 US

Current Mailing Address: New Mailing Address:

4361 SW 160 AVE 9615 NW 1ST CT

SUITE 202 SUITE 101

MIRAMAR, FL 33027 US PEMBROKE PINES, FL 33024 US

FEI Number: 20-0043724 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

 IGLESIAS, ADOLFO E
 IGLESIAS, ADOLFO E

 13501 S.W. 128TH STREET
 13170 S.W. 128TH STREET

 SUITE 208
 SUITE 203

 MIAMI, FL 33186 US
 MIAMI, FL 33186 US

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: 03/23/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: PENALOSA, IVAN Name: PENALOSA, IVAN

Address: 4361 SW 160 AVE, 202 Address: 9615 NW 1ST CT

City-St-Zip: MIRAMAR, FL 33027 US City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: S () Delete Title: VP (X) Change () Addition Name: NUNEZ, ROSANNA Name: NUNEZ, ROSANNA

Address: 4361 SW 160 AVE, 202 Address: 9615 NW 1ST CT

City-St-Zip: MIRAMAR, FL 33027 US City-St-Zip: PEMBROKE PINES, FL 33024 US

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: IVAN PENALOSA PD 03/23/2009