

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 06, 2005 8:00 am
Secretary of State

04-06-2005 90108 037 ***150.00

DOCUMENT # P04000006112
1. Entity Name
KEY AUTO SALES, INC.

40048364

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 18681 US HIGHWAY 331 SOUTH Suite, Apt. #, etc.		3. Mailing Address C/O DECKER & COMPANY, LLC. Suite, Apt. #, etc. 1875 OLD ALABAMA ROAD, #640	
City & State FREEPORT, FL.		City & State ROSWELL, GA.	
Zip 32439	Country	Zip 30076-2264	Country

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE		4. FEI Number 58-2299306		Applied For <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
		7. Name and Address of Current Registered Agent		
		Name ALAN KEY Street Address (P.O. Box Number is Not Acceptable) 18681 US HIGHWAY 331 SOUTH City FREEPORT FL Zip Code 32439		

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	DATE 3/25/2005

January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11.	
TITLE NAME ALLEN	PRESIDENT ALAN KEY 18681 US HIGHWAY 331 SOUTH FREEPORT, FL. 32439	TITLE NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE NAME	SEC/TREAS DENISE KEY 18681 US HIGHWAY 331 SOUTH FREEPORT, FL. 32439	TITLE NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE NAME		TITLE NAME	DO NOT WRITE IN THIS SPACE
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STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12: I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE <i>ALAN KEY</i>	3/25/2005	(770) 992-2290
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #