

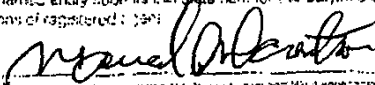
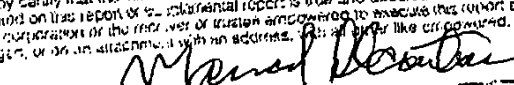
APR-21-05 THU 02:53 PM

FAX:

FILED
May 03, 2005 8:00 am
Secretary of State

05-03-2005 90155 048 ***150.00

2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P04000136301																							
1. Entity Name FLORIDA KEYS EXPRESS INC																							
Principal Place of Business 1315 SW 85 Ave Miami FL 33144		Mailing Address																					
2. Principal Place of Business		3. Mailing Address																					
Suite, Apt. #, etc.		Suite, Apt. #, etc.																					
City & State		City & State																					
Zip	Country	Zip	Country																				
4. FEI Number 20-1691767		Applied For ☐ Not Applicable																					
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required																					
6. Name and Address of Current Registered Agent Manuel Alcantara 1315 SW 85 Ave Miami FL 33144		7. Name and Address of New Registered Agent																					
Name		Street Address (P.O. Box Number is Not Acceptable)																					
City		FL Zip Code																					
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 4-27-05																					
FEE: NOW: FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees																					
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11:																					
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 Block 11 if changed, or on an attachment with an address. (This is an officer like or powered.)																							
SIGNATURE 		DATE 4-27-05																					
PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE																					

20054853



01312005 Chg-P CR2E034 (10/03)