

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000118116

Entity Name: KEYS BUSINESS SOLUTIONS INC

FILED
Jan 11, 2006
Secretary of State

Current Principal Place of Business:

110 GUMBO LIMBO ROAD
ISLAMORADA, FL 33036

New Principal Place of Business:

Current Mailing Address:

110 GUMBO LIMBO ROAD
ISLAMORADA, FL 33036

New Mailing Address:

FEI Number: 20-3357220

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOVAL, MARK V
110 GUMBO LIMBO ROAD
ISLAMORADA, FL 33036 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: KOVAL, MARK V
Address: 110 GUMBO LIMBO ROAD
City-St-Zip: ISLAMORADA, FL 33036

Title: P () Delete
Name: SMITH, ANDREW
Address: 10 AMARYLLIS DRIVE
City-St-Zip: KEY WEST, FL 33040

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: SMITH, ANDREW
Address: 17 EVERGREEN AVE
City-St-Zip: KEY WEST, FL 33040

I hereby certify that the information supplied with this filing does not qualify for the 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: MARK KOVAL

PRES

01/11/2006

Electronic Signature of Signing Officer or Director

Date