


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2007 8:00 am
Secretary of State

04-02-2007 90063 033 ***150.00

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| DOCUMENT # P06000089000 |  |
| 1. Entity Name ANY KEY COMPUTER SYSTEMS, INC. | |

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| Principal Place of Business 6694 NW 26TH WAY BOCA RATON, FL 33496 | Mailing Address 6694 NW 26TH WAY BOCA RATON, FL 33496 |
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| 2. Principal Place of Business - No P.O. Box # 13661 SANDY MALIBU POINT | 3. Mailing Address 13661 SANDY MALIBU POINT |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |

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| City & State DELRAY BEACH, FL | City & State DELRAY BEACH, FL |
| Zip 33446 | Country USA |



02162007 Chg-P CR2E034 (12/06)

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| 4. FEI Number 20-5156131 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

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| 6. Name and Address of Current Registered Agent DUKE, KEVIN R 6694 NW 26TH WAY BOCA RATON, FL 33496 | 7. Name and Address of New Registered Agent Name DUKE, KEVIN R Street Address (P.O. Box Number is Not Acceptable) 13661 SANDY MALIBU POINT City DELRAY BEACH FL Zip Code 33446 |
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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  **KEVIN R DUKE** **03/31/2007**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 | 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. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|--|--|---|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DRV DUKE, KEVIN R 6694 NW 26TH WAY BOCA RATON, FL 33496 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | ST DUKE, KEVIN R 6694 NW 26TH WAY BOCA RATON, FL 33496 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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, with all other like empowered.

SIGNATURE:  **KEVIN R DUKE** **03/31/2007** **(561) 894-1982**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #