

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 FEB - 1 AM 10: 32

DOCUMENT # P93000016287 (3)

1. Corporation Name

KEY DISTRIBUTORS IMPORT AND EXPORT, INC.

Principal Place of Business

**2727 S.W. 8TH STREET
MIAMI FL 33133**

Mailing Address

**2727 S.W. 8TH STREET
MIAMI FL 33133**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

03/02/1993

3a. Date of Last Report

02/23/1994

4. FEI Number

65-0393154

Applied For

Not Applicable

2. Principal Place of Business

21 1311 S.W. 57 Ave.

2a. Mailing Address

26 1311 S.W. 57 Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 Coral Gables, Florida

28 Coral Gables, Florida

Zip

Country

Zip

Country

24 33144

25 Dade

29 33144

30 Dade

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 189.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HERNANDEZ, HUMBERTO
2727 S.W. 8TH STREET
MIAMI FL 33133**

81 Name

HUMBERTO HERNANDEZ

82 Street Address (P.O. Box Number is Not Acceptable)

1311 S.W. 57 Ave.

83

84

**City
Coral Gables**

FL

85 Zip Code
33144

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

D

NAME

HERNANDEZ, HUMBERTO

STREET ADDRESS

41 SHORE DRIVE NORTH

CITY-ST-ZIP

MIAMI FL 33131

1.1 TITLE

D

1.2 NAME

HUMBERTO HERNANDEZ

1.3 STREET ADDRESS

1311 S.W. 57 Ave.

1.4 CITY-ST-ZIP

Miami, Florida, 33144

☒ Change ☐ Addition

TITLE

D

NAME

SANCHEZ, LUIS

STREET ADDRESS

1202 S.W. 93RD PLACE

CITY-ST-ZIP

MIAMI FL 33174

2.1 TITLE

S

2.2 NAME

HUMBERTO HERNANDEZ JR.

2.3 STREET ADDRESS

2200 S.W. 16 St. Suite No.214

2.4 CITY-ST-ZIP

Miami, Florida, 33145

☒ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an addendum.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(Typed Name #)

1-20-95 - (305) 265-2025