FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 MAY -1 PM 12:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000034516 (2)**

1. Corporation Name
KEY KNOWLEDGE COMPANY, INCORPORATED

Principal Place of Business	Mailing Address
1876 N UNIVERSITY DRIVE SUITE 308-M PLANTATION FL 33322	1876 N UNIVERSITY DRIVE SUITE 308-M PLANTATION FL 33322

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/09/1994
3a. Date of Last Report: Not applicable

2. Principal Place of Business (21) | 2a. Mailing Address (26)
Suite, Apt. #, etc. (22) | Suite, Apt. #, etc. (27)
City & State (23) | City & State (28)
Zip (24) Country (25) | Zip (29) Country (30)

4. FEI Number: 65-0497029 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangibles tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

SUCRRY, LISA E
1876 N UNIVERSITY DRIVE
SUITE 308-M
PLANTATION FL 33322

10. Name and Address of New Registered Agent

81 Name: Lisa E. Scurry
82 Street Address (P.O. Box Number is Not Acceptable): 1876 N. University Dr.
83: Suite 308-M
84 City: Plantation FL 85 Zip Code: 33322

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 _____ (DATE)

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY ST ZIP	Lisa E. Scurry 4401 NW 13th Street Ft. Lauderdale, Florida 33313
11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY ST ZIP	President/C.E.O. ☑ Change ☐ Addition Lisa E. Scurry 4401 NW 13th Street Ft. Lauderdale 33313
21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY ST ZIP	☐ Change ☐ Addition
31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY ST ZIP	☐ Change ☐ Addition
41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY ST ZIP	☐ Change ☐ Addition
51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY ST ZIP	☐ Change ☐ Addition
61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY ST ZIP	☐ Change ☐ Addition SM 6/19

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 119.07(3)(i), 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 address.

SIGNATURE: Lisa E. Scurry President/C.E.O. April 24, 1995 (305) 424-7400
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR (Date) (Daytime Phone #)

0230260 CP