

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Mar 25 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000070694 (2)

1. Corporation Name
KEYSTONE TOOL & MOLD, INC.

Principal Place of Business
2165 SUNNYDALE BLVD SUITE B
CLEARWATER FL 34625
US

Mailing Address
2165 SUNNYDALE SUITE B
CLEARWATER FL 34625-1211
US



2. Principal Place of Business
21 1150 KAPP DRIVE
Suite, Apt. #, etc.

2a. Mailing Address
26 1150 KAPP DRIVE
Suite, Apt. #, etc.

22 City & State
23 CLEARWATER FL
Zip Country
24 34625 25 US

27 City & State
28 CLEARWATER FL
Zip Country
29 34625 30 US

3. Date Incorporated or Qualified 09/26/1994
3a. Date of Last Report 03/12/1996

4. FEI Number 59-3273690
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 intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

KANE, JAMES A
2165 SUNNYDALE BLVD., SUITE P
STE 'B'
CLEARWATER FL 34625

10. Name and Address of New Registered Agent

81 Name KANE, JAMES A
82 Street Address (P.O. Box Number is Not Acceptable)
1150 KAPP DRIVE
83
84 City CLEARWATER FL 85 Zip Code 34625

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 required for each block of registered agent and officer and director. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS
1. TITLE PTS
2. NAME KANE, JAMES A
3. STREET ADDRESS 403 EDGEWOOD AVENUE
4. CITY-STATE-ZIP CLEARWATER FL
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
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14. I do hereby certify that the information supplied with this filing 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: [Signature] JAMES A. KANE 03-21-97 462 9977
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)