

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000083095 (7)

1. Corporation Name

KEYS KOLLECTABLES, INC.



Principal Place of Business

130 COCO PLUM DR #202
MARATHON FL 33050

Mailing Address

130 COCO PLUM DR #202
MARATHON FL 33050

2. Principal Place of Business

21 10800 Overseas Hwy

Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

22

27

City & State

23 Marathon FL

City & State

28

Zip

24 33050

Country

25 Montoe

Zip

29

Country

30

9. Name and Address of Current Registered Agent

KIRWAN, DAVID P
6803 OVERSEAS HWY
MARATHON FL 33050

3. Date Incorporated or Qualified
11/14/1994

3a. Date of Last Report
05/01/1995

4. FEI Number
65-0533628

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 ☒

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

Manly Lentini

(NOTE: Registered Agent signature required when re-registering)

DATE

4/30/96

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

P
NAME LENTINI, MARILYN
STREET ADDRESS 130 COCO PLUM DRIVE #202
CITY-ST-ZIP MARATHON FL

TITLE ☐ DELETE

VS
NAME LENTINI, FRED A.
STREET ADDRESS 130 COCO PLUM DRIVE #202
CITY-ST-ZIP MARATHON FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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)(k), 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:

Manly Lentini
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/96

305-743-1977

Date

Daytime Phone

CR2E034 (12/95)