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PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Feb 04 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000058497 (5)

KEY INTERNATIONAL PEMBROKE PINES, INC.

Principal Place	of Business	Mailing Address	Mailing Address		F SEE ISON HER HOUR ONLY MOUNT OF HE SON	l Edget dijat talit state i)(() { () () ()()
B48 BRICKELL AVENUE SUFTE 1000 MIAMI FL 33131		848 BRICKELL AVENUE SUITE 1000 MIAMI FL 33131-2943					
				3. Date Incorporated or Qualified 07/27/1995	3a. Date of Last 03/21/1996	'	
····	ace of Business	2a. Mailing Address			4. FEI Number		Applied For
21	B. ash a	26 Suite, Apt. #, etc.	<u> </u>		65-0603530	<u> </u>	Not Applicable
Suite. Apt. i		27	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State)	City & State			6. Election Campaign Financing Trust Fund Contribution		00 May Be od to Fees
Zip	Country	28 Zip	Country	•	8. This corporation has liability for		
24	25	29 30		Florida Statutes Yes 🔀 No			
	g. Name and Address of Currer	nt Registered Agent		~~~	10. Name and Address of New Re	agistered Agent	
MUR	AI, WALD, BIONDO & MORENO	, P.A.	81	Name			
	.E. SECOND AVENUE		82	Street A	ddress (P.O. Box Number is Not Accepta	ble)	
SUITE 900			<u> </u>				
MIAN	AI FL 33131		83				
			84	City	······································	FL 85 Zi	ip Code
11 Durewant i	to line provisions of Socions 507 850	2 and 607 1508 Florida State	ites the above	a-named c	orporation submits this statement for the		n its registered
 office or re 	eg stered agent, or both, in the State	e of Florida. Such change was	authorized by	/ the corpo	ration's board of directors. I hereby acce	pt the appointment	as registered
1	ni farmhar with, and accept the oblig	ations of, Section 607.0505, F	iorida Statute:	S.			
SIGNATURE .	Signature, typied or printed name of registered age	erc and one if applicable (NC	TE Registered Age	ent signature re	aquired when reinstating)	DATE	
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECT	ORS IN 12
TITLE	D	DELETE	1.1 TITLE			Chang	e 🔲 Addition
NAME	ARDID, JOSE		1.2 NAME		5		·
STREET ADDRESS	848 BRICKELL AVENUE, SUITE	1000	1.3 STREET	AODRESS	•		
CITY - ST - ZIP	MIAMI FL 33131		1.4 CITY-5	1-ZIP			
TITLE	D	DELETE	2.1 TITLE		•	L Chang	ge Addition
MAME	COURET, JUAN		2.2 NAME				
STREET ADDRESS	848 BRICKELL AVENUE, SUITI	E 1000	2.3 STREET	ADDRESS			
C(fy - S1 - ZIP	MIAMI FL 33131	DELETE	2. 4 CITY-	ST-ZiP			Addison
TITLE		☐ DELETE	3.1 TITLE	Į		L Chang	je [] Addition
NAME:		•	3.2 NAME			4	
STREET ADDRESS			3.3 STREET				
CITY-ST-ZIP TITLE		DELETE	3.4 CITY- 4.1 TITLE	SI-ZIP		Chang	ne Addition
NAME	•	O.C.	4. 2 NAME			والمالية في المالية	
STREET ADDRESS			4.3 \$TREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY-5	Į.			
TITLE	,	DELETE	5.1 TITLE			Chang	ge Addition
NAME			5.2 NAME				,
STHEET ADDRESS			5.3 STREET	ADDRESS			
City-St-76			5.4 CITY-5	ST-ZIP			
TITLE		DELETE	61 TITLE			☐ Chang	ge Addition
NAME			62 NAME	1			
STREET ADDRESS			63 STREET	ADDRESS			
CITY-ST-ZIP		M-44-	6.4 CiTY-5				
informatio	n indicated on this annu st repo rt or :	supplemental annual report is	true and acco	urate and t	ated in Section 119.07(3)(i), Florida Statuti that my signature shall have the same leg	al effect as if made	under oath: that
Lam an of	fficer or director of the corporation on In Brock 12 or Block 13 if changed, c	The receiver or trustee empo	wered to exec	cute this re	port as required by Chapter 607, Florida	Statutes; and that m	iy name