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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000010458 (3)

CARLTON KEY CORPORATION

Principal Place of Business Mailing Address

3250 SOUTH OCEAN BLVD. STE 205S PALM BEACH FL 33480

3250 SOUTH OCEAN BLVD. STE 205S PALM BEACH FL 33480-5651

## FILED Mar 03 1997 8:00am Secretary of State



İ				÷		3. Date incorporated or Qualified 01/29/1996	3a. Date of Las	t Report
2. Princ pal Fla	ice of Business	2a. Mailing Add	2a. Mailing Address			4. FEI Number		Applied For
21		26	6			65-063 4625 Not Applicable		
Suite, Apt #	, etc.		Suite, Apt. #, etc.			Certificate of Status Desired     Section		
City & State		City & State				6. Election Campaign Financing	<del></del>	May Be
23		28				Trust Fund Contribution		od to Fees
Zφ	Country	Zip		Country		8. This corporation has liability for i		
24	25	29	30	•		· · · · · · · · · · · · · · · · · · ·	Yes X No	O. 100.00E,
	9. Name and Address of Cur		1001	-Т		10. Name and Address of New Re		
BRAI	MLEY, RICHARD S			81 N	ame			
3250								
	2030		82 Street Address (P.O. Box Number is Not Acceptable)					
PALN	I BEACH FL 33480			83				
•								
				<b>84</b> C	ity		FL 85 Z	p Code
11. Pursuant to	the provisions of Sections 607.	0502 and 607.1508. Flori	ida Statutes, the	e above-na	med corp	poration submits this statement for the p	urpose of changing	its registered
office or re	gistered agent, or both, in the St familiar with, and accept the ob-	tate of Florida. Such chai	nge was author	rized by the	corporat	ion's board of directors. I hereby accep	ot the appointment	as registered
SIGNATURE								
12.	ignature Typed or protection is of registered OCT ICE DO	AND DIRECTORS		slered Agent s :	gnature requi	red when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE ERS AND DIRECT	ODS IN 12
TITLE	PSD		·	I.1 TITLE	<u></u>	ADDITIONS/CHANGES TO OFFICE	Chance	
1		ا ا					C. Onsing	o La Madicion
NAME BROMLEY, RICHARD S STREET ADDRESS 3250 SOUTH OCEAN BLVD. STE 205S				1.2 NAME				
DALLA BELOUEL AAAA				1.3 STREET ADDRESS				
CITY-ST-ZIP	PALM BEACH FL 33480			I.4 City-St-Zi	2			
THE		<u></u> u		2.1 TITLE			Chang	e L Addition
NAME			, 2	2.2 NAME				
STREET ADDRESS			2	2.3 STREET ADD	RESS			
CHY-S1-7/P				2. 4 CATY-ST-Z	P			
TITLE			DELETE 3	3.1 TITLE			☐ Chang	e 🔲 Addition
NAME			3	3.2 NAME	İ	13		
STREET ACORESS			3	3.3 STREET ADD	ress			
CITY-ST-ZIP			3	3.4. CITY - ST- Z	ıp ]	ŀ		
TITLE			ELETE 4	1.1 TITLE		í	Chang	e Addition
NAME				. 2 NAME		•		
STREET ADDRESS				4.3 STREET ADD	RESS			
CITY-ST-ZIP TITLE		Пг		4.4 CITY - ST - ZI 5.1 TITLE	<u> </u>		Chang	e Addition
		L., V	- I		-		L. Criant	lo Emi regulion
NAME:				5.2 NAME				
STREET ADDRESS				5.3 STREET ADD				
CiTY-\$1-ZiP		······		5.4 CITY - ST - 21	P			
THE			DELETE 6	5.1 TITLE			Chang	e 🔲 Addition
NAME			<b>[</b> 6	5.2 NAME				
STREET ADDRESS			<b>.</b>	6.3 STREET ADD	RESS			
C/TY+ST+Z/P			i e	6.4 CITY - ST - ZI	<sub>P</sub>			

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/13/22