Applied For

Fee Required \$5.00 May Be

Added to Fees

Not Applicable \$8.75 Additional

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

30

81 Name

DOCUMENT # P96000092576

1. Corporation Name

KEYS INTERNATIONAL CYCLE BENTALS INC

25

Principal Place of Business	Mailing Address				
675 OVERSEAS HIGHWAY IARATHON FL 33050-2734	6675 OVERSEAS HIGHWAY MARATHON FL 33050-2734				
2. Principal Place of Business	2a. Mailing Address				
Suite, Apt. #, etc.	26 Suite, Apt. #, etc.				
City & State	City & State				

9. Name and Address of Current Registered Agent

FILED Jul 08, 1999 8:00 am Secretary of State

07-08-1999 90033 040 ***550.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

Trust Fund Contribution

Personal Property Tax.

11/12/1996 4. FEI Number

65-0711980

MAESTAS, JAMES R 6675 OVERSEAS HIGHWAY			82	Street Address (P.O. Box Number is Not Acceptable)				
MAR	ATHON FL 33050	83						
•			84	84 City FL 85 Zip Co				
office or re	to the provisions of Sections 607.0502 and agistered agent, or both, in the State of Floi in familiar with, and accept the obligations of	ida. Such change was a	uthorized by	the corporati	poration submits this statement on's board of directors. I hereb	for the purpose of by accept the appoin	changing its r ntment as reg	egistered istered
SIGNATURE	Signature, typed or printed name of registered agent and tit	e if anglicable (NOTE	· Registered Agen	t signature requir	ed when reinstating)	DATE		
12.	OFFICERS AND DIF	*****	13.		ADDITIONS/CHANGES	TO OFFICERS AN	D DIRECTO	RS IN 12
TLE	PM	☐ DELETE	1.1 TITLE				☐ Change	Addition
iAME	MAESTAS, JAMES R	—	1.2 NAME					
TREET ADDRESS	13 MAN-O-WAR RD.		1.3 STREET	ADDRESS				
	MARATHON FL 33050		1.4 CITY-S					
TITY-ST-ZIP	VPTS	☐ DELETE	2.1 T/TLE	-21			Change	☐ Addition
IAME	LACY, TERESA A		2.2 NAME					
	13 MAN-O-WAR RD.		2.3 STREET	ADDDESS				
TREET ADDRESS								
ITY-ST-ZIP	MARATHON FL 33050	☐ DELETE	2.4 CITY-S 3.1 TITLE	1-ZIP			[] Change	☐ Addition
			3.2 NAME					
AME			3.3 STREET	***************************************				
TREET ADDRESS								
TY-ST-ZIP	- N. M.C	☐ DELETE	4.1 TITLE	1-2112		Change	☐ Change	☐ Addition
IπE								
IAME (4, 2 NAME					
TREET ADDRESS			4.3 STREET					
ZITY-ST-ZIP		□ oc. crc	4.4 CITY-S	r-ZIP			Change	Addition
ITLE		☐ DELETE	5.1 TITLE				Change	
IAME			5.2 NAME					
TREET ADDRESS			5.3 STREET					
ITY-ST-ZIP			5.4 CITY-S	r-ZIP			Channa	☐ Addition
ITLE		☐ DELETE	6.1 TITLE				Change	☐ Addition
IAME			6.2 NAME					
TREET ADDRESS			63 STREET	ADDRESS				
TV ET 710 12 51	19 July 15 (5) (4)		6.4 CITY-S	r-ZIP				

officerior, director of the corporation or the receiver or trustee empowered and that my signature shall have the same regardened as it made under oath, that I am all officerior of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Forda Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attaghment with an address, with all other like empowered.

SIGNATURE: