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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000062518 (0)

**KEY'S IRRIGATION INCORPORATED** 

**FILED** Apr 13 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address				OL IEN KAN	
3715 NW 113 AVE. 3715 NW 113 AVE. CORAL SPRINGS FL 33065 CORAL SPRINGS FL			3065	DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified		
Principal D	Name of Divisions	To Marine Address			07/18/1997		
2. Principal Place of Business 2a. Mailin 21		2a. Mailing Address 26	aling Address			lied For Applicable	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc.			5. Certificate of Status Desired Fee Regi		
City & State		City & State	City & State				
23		28	28		8. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Country		8. This corporation owes or has paid the current year Intar	•	
24	25 29 30		30		Personal Property Tax due June 30.		
g. Name and Address of Current Registered Agent				81 Name	10. Name and Address of New Registered Agent		
	TRU, ANGELA A			81 Name			
2600 N. ANDREWS AVE.			82 Street Add	fress (P.O. Box Number is Not Acceptable)	• • • • • • • • • • • • • • • • • • • •		
F	T. LAUDERDALE FL 33311						
,				83			
			1	84 City	FI 85 Zip Co	xde	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	es, the at	ove-named cor	moration submits this statement for the purpose of changing its	registered	
office or r	registered agent, or both, in the State am familiar with, and accept the obliga-	of Florida, Such change was a ations of Section 607 0505. Flo	authorized orida Stati	by the corpora	ation's board of directors. I hereby accept the appointment as re	gištered	
	and decopy the cong.	11010 01, 0001011 001.0000, 110	moa Otat	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
SIGNATURE	Signature typed or printed name of registimed agr	rol and title if applicable (NOT)	E. Registered	Agent signature requ	lired when reinstating) DATE		
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	IN 12	
TITLE	DP	☐ DELETE	1.1 10	LE	Change	Addition	
NAME			1.2 NA	ME			
STREET ADDRESS 3715 NW 113 AVE.			1.3 ST	REET ADDRESS	•		
CITY-ST-ZIP			1.4 CIT	Y-ST-ZIP			
TITLE	DT DELETE		2.1 717	LE	L] Change	Addition	
NAME ROSIS, KATHY J			2.2 NA	ME			
STREET ADDRESS	3715 NW 113 AVE.		2.3 ST	REET ADDRESS			
CITY-ST-ZIP	CORAL SPRINGS FL 33065			IY-ST-ZIP			
TITLE			3.1 TIT		Change	☐ Addition	
NAME			3.2 NA	1			
STREET ADDRESS				REET ADORESS			
CITY-ST-ZIP		DELETE	_	Y-ST-ZIP	T 0	4.4.00	
TITLE		U VELETE	4.1 TIT		☐ Change	Addition	
NAME			4. 2 NA				
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP TITLE		DELETE		Y-ST-ZIP	Change	Addition	
NAME			5.1 TiT 5.2 NA		Change	L MOUNION	
STREET ADDRESS						1	
				IEET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	5.4 CIT 6.1 TIT	Y-ST-ZIP	Change	Addition	
NAME	·	- Deterit	6.1 111 6.2 NA		□ cusuõs (	Avuilion [	
STREET ADDRESS				NE NEET ADDRESS			
WITHER ADDRESS			0.3311	IEE I MUUNESS			

14. I 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 notation or trustge 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 or as all training it with an address.