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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000074455 (1)

KEY-TECH LOCKSMITH, CORP.

FILED Apr 02 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address						C MANUSAL NO MELY MOULE AND CONTRACT AND CONTRACT OF CONTRACT AND CONT	9811 2 1811 91391 91	INDA BUSI INDA	
671 SE 3 PL HIALEAH FL	39010	671 SE 3 PL HIALEAH FL 33010							
TWILE THE		THALLATT I'L SOUT				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified 08/26/1997		j	
2. Principal P	ace of Business	2a. Mailing Address				4. FEI Number	Ar	oplied For	
21		26				65-0778384	No	ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	<u> </u>			5. Certificate of Status Desired		Additional	
22		27				Fee Hequired			
City & State		City & State	├ ┐ '			6. Election Campaign Financing	\$5.00 May Be Added to Fees		
Zip Country						Trust Fund Contribution			
24	25		30	ili y		8. This corporation owes or has paid the or Personal Property Tax due June 30.		angible No	
24	9. Name and Address of Cui		301			10. Name and Address of New Registere		3.40	
₽∩	DRIGUEZ, MARIO	· · · · · · · · · · · · · · · · · · ·		81	Name		- -		
	1 SE 3 PL			82	Stroot Adds	ress (P.O. Box Number is Not Acceptable)			
	LEAH FL 33010			اء"	SUBBI AUG	ress (F.O. Box Number is Not Acceptable)			
			Ţ	83					
			ŀ	B4	City	F	85 Zip	Code	
## Durayant	to the provisions of Sections 607	0003 and 607 1609 Florida Statuta	a tho sh		nomed corr			te registered	
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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstailing) DATE									
12.		AND DIRECTORS	13.	- Age	err eviluarone redor	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	3S IN 12	
TITLE	DP	DELETE	→	1.1 TITLE			Change	Addition	
NAME	RODRIGUEZ, MARIO		1.2 NA	1.2 NAME					
STREET ADDRESS	671 SE 3 PL		1.3 STI	REET	ADDRESS				
CITY-ST-ZIP	HIALEAH FL 33010		1.4 CITY-ST-ZIP		T - ZIP				
TITLE		☐ DELETE	ETE 2.1 TITLE			***	Change	☐ Addition	
NAME			2.2 NAME						
STREET ADDRESS			2.3 ST	2.3 STREET ADDRESS				i	
CITY-ST-ZIP			2. 4 CI		ST-ZIP		[] A)	7 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
JITLE .		☐ DELETE	3.1 TITLE				Change	Addition	
NAME			3.2 NA						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP TITLE		DELETE	3.4. C		ST-ZIP		Change	Addition	
NAME			4.1 111LE 4. 2 NAME				onongo		
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			4.4 CIT						
TITLE		DELETE	5.1 TIT		. 211		☐ Change	Addition	
NAME			5.2 NA				=		
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			5.4 CiT		į.				
TITLE	No.	☐ DELETE	6.1 TiT				Change	Addition	
NAME			6.2 NA	ME				İ	
STREET ADDRESS			6.3 ST	REET	ADDRESS				
CITY-ST-ZIP			6.4 CIT						
14. Thereby o	certify that the information supplie	d with this filing does not qualify for	the exe	mp	tion 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.