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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9700090644

TMP OF THE KEYS, INC.

## **FILED** Feb 02, 1999 8:00am **Secretary of State**

02-02-1999 90029 019 \*\*\*150.00



	· .		_				
Principal Place	e of Business	Mailing Address					
11239 OVERSEAS HWY. MARATHON FL 33050		C/O BENJAMIN ROCHE C.P.A.		ľ			
		P.O. BOX 56 MARATHON FL 33050			DO NOT WRIT	DO NOT WRITE IN THIS SPACE	
		US	,		3. Date Incorporated or Qualifed	<u> </u>	
			•		10/22/1997		
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number		plied For
21		26			65-0790147		ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc	<b>3</b> .		5. Certificate of Status Desired	□ \$8.75 ·	Additional equired
22		27 City & State		<del></del>	6 Firstian Compaign Financing		May Be
City & Stat	te	City & State			6. Election Campaign Financing Trust Fund Contribution	11	to Fees
Zip	Country	Zip	Cou	ntry	8. This corporation owes the curre	ent year Intangible	
24 24	25	29	30	•	Personal Property Tax.	☐Yes	□No
24]	9. Name and Address of Curre	nt Registered Agent	1221		10. Name and Address of New R	tegistered Agent	
		1. J. 7. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		81 Name			
WANG, MICHAEL Y.N.				82 Street A	ddress (P.O. Box Number is Not Accepta	ible)	
11239 OVERSEAS HWY. MARATHON FL 33050				92	p to the control of t		184 817 (87)
				83	- 1 (14 기준	世界 以外形式的程	
				84 City	The second distriction of	FI 85 Zip	Code
3 - Area - 19 - 19 - Area - 19 - 19 - 19 - 19 - 19 - 19 - 19 - 1	Footions 607.05	02 and 607 1508 Florida	Statutes the a	hove-named o	corporation submits this statement for the	purpose of changing its	registered
15 - 45 - A - A - A	registered agent of both in the Stati	a of Fiorias (Suico custodo)	was aumonzed	I DA MIC COLDO	ration's board of directors. I hereby accep	ot the appointment as re	egistered
agent. I a	am familiar with, and accept the oblig	ations of Section 607.050	5, Florida Stat	utes.	•		{
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable.	(NOTE: Registered	Agent signature rec	quired when reinstating)	DATE	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OF		ORS IN 12
TITLE	P					Change.	☐ Addition !
		☐ DELÉ	1.1 Ti	TLE	5.7 × 7 (5.7 ± 7)	Change	Addition
NAME	GANDON, FERNANDO		1.2 N	AME	5.64 个智力设置	☐ Change	Addition
NAME STREET ADDRESS	561 S.E. 18 AVE.	□ bece	1.2 N 1.3 S	AME TREET ADDRESS	50 + 1 SV 37	☐ Change	Addition [
	561 S.E. 18 AVE. POMPANO BEACH FL 33060		1.2 N 1.3 S 1.4 C	AME TREET ADDRESS ITY-ST-ZIP	567 + 1 Min 47		
STREET ADDRESS	561 S.E. 18 AVE. POMPANO BEACH FL 33060 VP	□ DELE	1.2 N 1.3 S 1.4 C	AME TREET ADDRESS ITY-ST-ZIP TLE	50° 4 ° 30° 42°	☐ Change	Addition Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME	561 S.E. 18 AVE. POMPANO BEACH FL 33060 VP WANG, MICHAEL		1.2 N 1.3 S 1.4 C ETE 2.1 T 2.2 N	AME TREET ADDRESS TTY-ST-ZIP TLE AME	547 + 1 18 + 187		
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	561 S.E. 18 AVE. POMPANO BEACH FL 33060 VP WANG, MICHAEL 11239 OVERSEAS HWY.		12 N 1.3 S 1.4 C ETE 2.1 T 2.2 N 2.3 S	AME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS			
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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 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, with all other like empowered.