


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 11, 2004 08:00 AM
Secretary of State

DOCUMENT # P97000091372 1. Entity Name KLEY, INC.	
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Principal Place of Business 2000 TOWERSIDE TERRACE APT. 408 MIAMI, FL 33138	Mailing Address C/O VIVIAN KLEPACH 2000 TOWERSIDE TERRACE, APT. 408 MIAMI, FL 33138
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DO NOT WRITE IN THIS SPACE



06062004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0790884	Applied For Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

KLEPACH, VIVIAN
2000 TOWERSIDE TERRACE
APT. 408
MIAMI, FL 33138

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing) **DATE** _____

FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KLEPACH, VIVIAN C/O 200 TOWERSIDE TERRACE MIAMI, FL 33138
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KLEPACH, VIVIAN 2000 TOWERSIDE TERRACE, APT. 408 MIAMI, FL 33138
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000162479
06/11/04-80001-011 150.00

U000000162479
06/11/04-80001-012 8.75

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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Vivian Klepach June 9/04 305-893-9450
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #