

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000100076

Entity Name: CYBER KEY, INC.

FILED  
Jul 07, 2007  
Secretary of State

## Current Principal Place of Business:

640 ELMA AVENUE  
BIG PINE KEY, FL 33043

## New Principal Place of Business:

## Current Mailing Address:

640 ELMA AVENUE  
BIG PINE KEY, FL 33043

## New Mailing Address:

128 CAMBRIDGE ROAD  
ASHEVILLE, NC 28804

FEI Number: 65-0881336

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BLUM, SAMUEL SPENCER  
2666 TIGERRAIL AVENUE  
SUITE 106  
COCONUT GROVE, FL 33133 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: TAYLOR, M.J.  
Address: 640 ELMA AVENUE  
City-St-Zip: BIG PINE KEY, FL 33043

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: TAYLOR, M.J.  
Address: 128 CAMBRIDGE ROAD  
City-St-Zip: ASHEVILLE, NC 28804

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: M.-J. TAYLOR

PRES

07/07/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date