


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90199 040 ***150.00

DOCUMENT # P99000079207

1. Entity Name
FISHER KEY PROPERTIES, INC.



Principal Place of Business Mailing Address

701 BRICKELL AVENUE **701 BRICKELL AVENUE**
SUITE 3000 **SUITE 3000**
MIAMI, FL 33131 **MIAMI, FL 33131**

60034185



2. Principal Place of Business 3. Mailing Address

1001 BRICKELL BAY DRIVE **1001 BRICKELL BAY DRIVE**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
SUITE 3112 **SUITE 3112**

03312006 Chg-P CR2E034 (11/05)

City & State City & State

MIAMI, FL. **MIAMI FL.**

4. FEI Number Applied For

65-0995421 Not Applicable

Zip Country Zip Country

33131 **USA** **33131** **USA**

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PERLMAN, GEORGE D P.A.
701 BRICKELL AVENUE
SUITE 3000
MIAMI, FL 33131

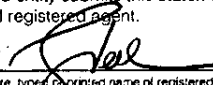
7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)
1001 BRICKELL BAY DRIVE
SUITE 3112

City State Zip Code
MIAMI **FL** **33131**

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:  DATE: **4/3/06**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

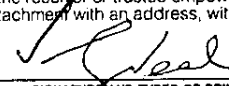
10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	MOSELSON, DENNIS	
STREET ADDRESS	701 BRICKELL AVE. STE. 3000	
CITY-ST-ZIP	MIAMI, FL 33131	
TITLE	TS	<input type="checkbox"/> Delete
NAME	MOSELSON, MARIAN	
STREET ADDRESS	701 BRICKELL AVE. STE. 3000	
CITY-ST-ZIP	MIAMI, FL 33131	
TITLE	VP	<input type="checkbox"/> Delete
NAME	PERLMAN, GEORGE	
STREET ADDRESS	701 BRICKELL AVE.	
CITY-ST-ZIP	MIAMI, FL 33131	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	MILLMAN, DEBORAH	
STREET ADDRESS	701 BRICKELL AVENUE, SUITE 3000	
CITY-ST-ZIP	MIAMI, FL 33131	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1001 BRICKELL BAY DRIVE, SUITE 3112	
STREET ADDRESS	MIAMI, FL. 33131	
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1001 BRICKELL BAY DRIVE, SUITE 3112	
STREET ADDRESS	MIAMI, FL. 33131	
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1001 BRICKELL BAY DRIVE, SUITE 3112	
STREET ADDRESS	MIAMI, FL. 33131	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  **Vice President** DATE: **4/3/06**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #