## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 16, 2006 08:00 AM Secretary of State

ANNUAL REPORT					Teb 10, 2000 00.00 An			
DOCU	MENT # S1554	3				Secre	tary of	State
t. Entity Name KEY MARCO HOLDINGS, INC.								
NET WAT	.00 / 10 <u>L</u> D/1100, 1110	•						
Principal Place	e of Business	Mailing A	ddress		1			
	AVE., EAST, STE 1010 NTARIO M4T 2S3 XX		CLAIR AVE., EAST, STE TO, ONTARIO M4T 2S3 I, XX		* STREET, WITH \$1		1 8 (8): X 18): X 18): B(1)	
n	O NOT WR	CE	02102006 No Chg-P CR2E034 (11/05)					
ט	O MOL MAN	11 E 11.4 1	HIS STA		4. FEI Numb 52-171			Applied For Not Applicable
					<del>-</del>	of Status Desired	\$8.	75 Additional
<b></b> _				· • · · · · · · · · · · · · · · · · · ·	3. Cennicate	O Sizius Desireu		Required
<del></del>	6. Name and Address of	Current Registered A	igent					
	TICE-HALL CORPORA	TION SYSTEM	INC.	\$	no	NOT W	RITE	
1201 HAYS STREET SUITE 105				1				•
	SSEE, FL 32301		•		IN	THIS SF	ACE	
}						<del></del> -	»- »» · · · ·	. *************************************
	named entity submits this stations of registered agent.	ement for the purpose	of changing its registe	red office or register	red agent, or bo	olh, in the State of Fi	orida. I am famili	ar with, and accept
SIGNATURE.	Signature, typed or printed name of regis	tered agent and file if applical	ble (NOTE. Register	red Agent signature required	d when reinstating)		OATE	<del></del>
FILI After Ma	E NOW!!! FEE IS \$150 ay 1, 2006 Fee will be	.00	Election Campaign Fina Trust Fund Contribution		.00 May Be led to Fees			
10.		RS AND DIRECTORS			transition to			<del></del>
HILE NAME	CEO DIAMOND, CAREY J.			1				
STREET ADDRESS	35 MILLBANK AVE			1				
City-ST-ZIP	токоито, оит,	<u> </u>		_1		ലഹരമ്മാ	waaraa	
TITLE NAME	PD DIAMOND, CAREY J.						1436538 -80004-01	7 150.00
STREET ADDRESS	35 MILLBANK AVE			1		- and Market of Street Parket B. Control Control	30431 41	
CITY-ST-ZIP	TORONTO, ONT,			_{				
TITLE NAME	VP ELMER, KIM							
STREET ADDRESS	101 CONSTANCE ST			1	<b>D</b> O	NOTIA		
CITY-ST-ZIP	TORONTO, ON M6R1S				טט	NOT W	KIIE	
TITLE				1	IN.	THIS SE	PACE	
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CITY-ST-ZIP				1				
TITLE								
1 NAME	5			-				

12. I hereby certify that the information supplied with this titing does not qualify for the examptions 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 it 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 AND TYPED ON PRINTED NAME OF SIDNING OFFICER OF DIRECTOR

STREET ADDRESS CITY-ST-ZIP

CAREY J DIAMOND

Feb 13/06 (416)961-5355