

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # S24679	
1. Entity Name KEYWORD REPORTING, INC.	

Principal Place of Business 2016 SE 21ST AVE. FT. LAUDERDALE, FL 33316	Mailing Address 2016 SE 21ST AVE. FT. LAUDERDALE, FL 33316
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DO NOT WRITE IN THIS SPACE



04292004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0236553	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SMITH, PRISCILLA J 2016 SE 21 AVE FT LAUDERDALE, FL 33316
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IN THIS SPACE**

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 not applicable. (NOTE: For joint agent signature required, attach separate sheet.)

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing First Fund Contribution ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	DPV SMITH, PRISCILLA J 2016 SE 21ST AVE. FT. LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	ST SMITH, RUTH B 2024 SE 21ST AVE FT LAUDERDALE, FL
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TITLE NAME STREET ADDRESS CITY-STATE-ZIP	

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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)(a) 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: <i>Priscilla J. Smith</i> PRISCILLA J. SMITH	4-29-2004 954-270-6077
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date