FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

KEYS SUNRISE PROPERTIES, INC.

DOCUMENT #

CITY-\$T-ZIP



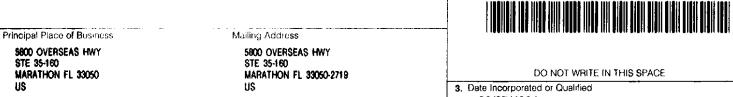
FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

(4)

FILED May 21 1998 8:00am Secretary of State



MARATHON	FL 33050	MARATHON FL S	MARATHON FL 33050-2719 US			DO NOT WRITE IN THIS SPACE			
US		U\$				3	3. Date Incorporated or Qualified		
							02/25/1991		
<u> </u>	ace of Business	2a, Mailing Addres	S			4.	4. FEI Number	ļ <u>1</u>	Applied For
Suite, Apt	# otc	Suite Ant # of	Suite, Apt. #, etc.				65-0254626		Not Applicable Additional
22	m, 010.	27	-1			5.	5. Certificate of Status Desired		Required
City & State	9		City & State				Election Campaign Financing		0 May Be
23		28				"	Trust Fund Contribution		d to Fees
Zip	Country	Zφ	Cou	ntry		8.	8. This corporation owes or has paid the cur	rent year I	ntangible
24	25	[29]	30	, 					□ No
	9. Name and Address of Curre	nt Registered Agent		041		10	O. Name and Address of New Registered	Agent	
	ERBINSKI, MARK			81	Name				
	800 OVERSEAS #35-160			82	Street Addr	ress (l	(P.O. Box Number is Not Acceptable)		
·M	ARATHON FL 33050			83					
1				33	ı				
				84	City		FL	85 Zip	p Code
11 Pursuant t	o the provisions of Sections 607 056	32 and 607 1508 Florida	Statutes the al	ONE	a-named core	oratio			its registered
office or re	ogistered agent, or both in the State of familiar with, and accept the oblic	of Horida Such change	was authorized	d by	the corporate	tion's	ion submits this statement for the purpose of board of directors. I hereby accept the app	ointment a	s registered
1 -	n jaminar with, and accept the font	вшонь от, ассион вол да	ua, monda atar	uios	٠.				
SIGNATURE	Signature typed or printed name of registered ag	ent teid blie if applicable	(NOTE flegistered	 LAge	nt signature requir	red who	er reinstating) DATE		
12.	OFFICERS AN	DIBECTORS	13.				ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	ORS IN 12
TITLE	Р	☐ DELL	TE 1.1 TIT	LE				Change	Addition
NAME	SERBINSKI, MARK T.		1.2 NA	ME					
STREET ADDRESS	5800 OVERSEAS HWY #35	5-160	1.3 \$T	RFET	ADDRES\$				
CITY-ST-ZIF	MARATHON FL 33050		1.4 CII		r - ZIP				F-1 > 4 HI
TITLE	ST OFFICIAL LABORATION	☐ DELF						Change	Addition
NAME	SERBINSKI, KRISTINA	. 400	2.2 NA						
STREET ADDRESS	5800 OVERSEAS HWY #35 MARATHON FL 33050)- 10U			ADDRESS		•		
CITY-ST-ZIP	MANATHUN FE 33050	DELE	. 2. 4 CI		IT- ZIP	——		☐ Change	Addition
NAME			3.1 NA		ŀ			Onlinge	
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			3.4. CI		- 1				
TITLE		☐ DELF			1-211			Change	Addition
NAME			4. 2 N						_
STREET ADDRESS			4.3 ST	REE1.	ADDRESS				
CITY-ST-ZIP			4.4 CI	fY-\$1	T-ZIP				
TITLE		☐ DELE	TE 5.1 TIS	ιE				Change	Addition
NAME			5.2 NA	ME					
STREET ADDRESS			5 3 ST	REET.	ADDRESS				
CITY-ST-ZIP		<u> </u>	5.4 CIT	[Y-S]	1-ZIP				
TITLE		☐ DELE	E 6.1 TIT	LE				☐ Change	Addition
NAME			6.2 NA	ME					
STREET ADDRESS			6.3 ST	REE1	ADDRESS				

14. Thereby 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 annual report of supplemental annual 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 13 if changes, or on an attachment with an addiss.

6.4 CITY-ST-ZIP