## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sanora B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS **DOCUMENT #** S95358 (5)KEYSTONE CONSULTING GROUP, INC. Principal Place of Business Mailing Address 50+ E-KENNEDY BLVD. 615 E. Lewader 615 E LUNSDEN RD **CUITE 703** SUITE 703 TAMPA PL 33602 BRANDON FL 33511 3. Date Incorporated or Qualified 3a. Date of Last Report 11/20/1991 05/10/1995 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 21 26 59-3101898 Not Applicable Suite, Apt. #, etc. Suite Apt #, etc \$8.75 Additional 22 5. Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Żφ Country Country 8. This corporation has liability for intangible tax under s 199.032. 24 25 29 30 Flor da Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HECTOR, ERIC G 2007 BROOKER TRACE LANE VALRICO-FL-33659 11. Pursuant to the provisions of Sections 607.0502 and 607.1506. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered off registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Haw 4-29-96 s agent and the map defails 12 OFFICERS AND DIRECTORS CR2E034 (12/95) 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1 1 1 11 Change NAME HECTOR, ERIK G. STREET ADDRESS 612 E LUNSDEN RD 1.3 STREET ADDRESS CITY - ST - ZIP **BRANDON FL** 14 CITY - ST - ZIP TITLE DELETE 2 1 11"(F Addition NAME HECTOR, ERIK G. 2.2 NAME STREET ADDRESS 612 E LUNSDEN RD 2.3 STREET ADDRESS CITY-ST-ZIP **BRANDON FL** 24 City ST-ZiP TITLE DELETE 3 1 TiTue \_\_\_ Change ☐ Addition NAME 3.2 NAME STREET ACORESS 3.3 STREET ADDRESS DITY-ST-ZIP 3.4 CITY-ST ZIP TiTLE DELETE 4. 1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREE! ADDRESS CHTY-ST-ZIP 4.4 C!TY - ST - ZIP TITLE DELETE 5 1 TILE ☐ Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CHY - \$1 - 219 TOTLE DELETE 6 1 TITLE ☐ Change Addition NAME 6.2 NAM: STREET ADDRESS

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under appears in Block 12 or Block 13 if changed for on an attachment with an address.

6.3 STREET ADDRESS

6.4 CITY - ST - ZIF

SIGNATURE: \_<

CITY-ST-ZIP

4-29-96 919-878-884