


FILED
Apr 10, 2007 08:00 AM
Secretary of State


2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # V25104
 1. Entity Name
 KEY MOTEL COMPANY



Principal Place of Business 4810 W IRLO BRONSON HWY KISSIMMEE, FL 34746 US	Mailing Address 4810 W IRLO BRONSON HWY KISSIMMEE, FL 34746 US
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DO NOT WRITE IN THIS SPACE



03302007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3114529	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SEABREEZE BOOKKEEPING TAX SERVICE
 441 SOUTH RIDGEWOOD AVE.
 STE 108
 DAYTONA BEACH, FL 32114

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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 _____
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, 2007 Fee will be \$550.00

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

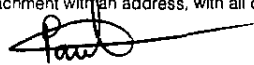
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP CHEN, TE-CHU 4810 W IRLO BRONSON HWY KISSIMMEE, FL 34746
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M CHEN, PO-LI 4810 W IRLO BRONSON HWY KISSIMMEE, FL 34746
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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:  Po-Li Chen Date: 4/6/07 Daytime Phone #: (407) 396-6200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR