2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # V62709

1. Entity Name

DINK INC. OF KEY WEST



Principal Place of Business

610 SOUTHARD STREET REAR KEY WEST, FL 33040 Mailing Address

610 SOUTHARD STREET REAR KEY WEST, FL 33040 FILED Apr 24, 2008 08:00 AN Secretary of State



DO NOT WRITE IN THIS SPACE

02122008 No Chg-P CR2E034 (11/05)

4. FEI Number
NOT APPLICABLE

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BRUCE, BENJAMIN C 610 SOUTHARD STREET REAR KEY WEST, FL 33040 DO NOT WRITE

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

10. TITLE

NAME STREET ADDRESS

TIFLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TIFLE
NAME
STREET ADDRESS

CITY-ST-ZIP

CITY-ST-7(P

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Signature, typed or printed name of registered agent and title (I applicable

OFFICERS AND DIRECTORS

(NOTE Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00

BRUCE, BENJAMIN C

KEY WEST, FL 33040

610 SOUTHARD ST. REAR

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

> U00000919560 05/14/08-80008-024 150.00

DO NOT WRITE IN THIS SPACE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the inform

12. Thereby certify that the information supplied with this filling 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:



4/22/08 305-294-6886

Daytime Phone #