

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

FILED

02 OCT 29 PM 3:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 001000086888

1. Entity Name

Citizen Insurance of Flagler, Inc.

**DO NOT WRITE IN THIS SPACE**

100008665731  
10/29/02--01067--002 \*\*150.00

2. Principal Place of Business

8100 NW 53rd Terr

3. Mailing Address

Same

Suite, Apt. #, etc.

Suite 220

Suite, Apt. #, etc.

City & State

Miami FL

City & State

Zip

33166

Country

USA

Zip

Country

4. FEI Number

65-1132833

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Albert Fernandez

Street Address (P.O. Box Number is Not Acceptable)

8100 NW 53rd Terr.

Suite 220

City

Miami

FL

Zip Code

33166

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

Albert Fernandez

10/22/02

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE Vice President  
NAME Albert Fernandez  
STREET ADDRESS 8100 NW 53rd Terr. #220  
CITY-ST-ZIP Miami FL 33166

TITLE President  
NAME Alex Anthony  
STREET ADDRESS 8100 NW 53rd Terr. #220  
CITY-ST-ZIP Miami FL 33166

TITLE Treasurer  
NAME Cecilia Estrada  
STREET ADDRESS 8100 NW 53rd Terr. #220  
CITY-ST-ZIP Miami FL 33166

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**DO NOT WRITE  
IN THIS SPACE**

13. I hereby 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 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 11 or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

305/477-1697

CR2034B (12/01)

35 11/5/02

# Keystone Staffing, Inc.

October 22, 2002

Department of State  
Division of Corporations  
409 East Gaines Street  
Tallahassee, Florida 32399

Attn: Reinstatement Section

Dear Sirs/Madam:

I have noticed that the corporations listed below have been dissolved for failure to file the Annual Business Report. I have not received any paperwork regarding the status of our corporation.

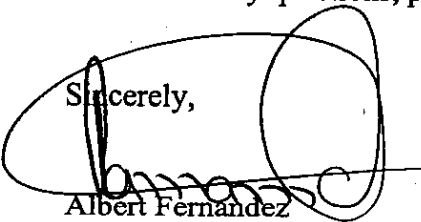
Keystone Staffing, Inc.  
Keystone Security, Inc.  
Northern Capital, Inc.  
Citizen Insurance of Doral, Inc.  
Citizen Insurance of Flagler, Inc.  
Citizen Insurance of Bird Road, Inc.  
Buckingham Police Supply, Inc.

Please note that we have moved to a different suite, Suite 220. The correct address is as follows:

8600 NW 53<sup>rd</sup> Terrace, Suite 220  
Miami, Florida 33166

If there are any questions, please feel free to contact me at (305) 639-2595.

Sincerely,



Albert Fernandez  
Keystone Staffing, Inc.

8600 NW 53<sup>rd</sup> Terrace, Suite 220, Miami Florida 33166  
Telephone (305) 639-2595 / Fax (305) 639-2601