

P05000033897

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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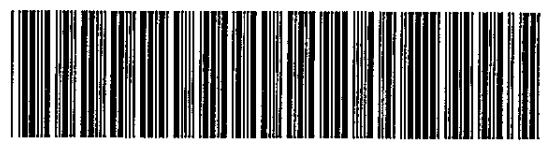
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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** KEYSTONE INSPECTION SERVICES, INC  
(Name of corporation)

**DOCUMENT NUMBER:** POS000033897

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

JOHN M. URABEC II  
(Name of contact person)

KEYSTONE INSPECTION SERVICES, INC  
(Firm/Company)

27907 SUMMER PLACE DR.  
(Address)

WESLEY CHAPEL, FL 33543  
(City/state and zip code)

For further information concerning this matter, please call:

JOHN M. URABEC II at ( 813 ) 363-4060  
(Name of contact person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

