

## 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000034440

1. Entity Name  
CONSTANT COMMUNICATIONS, INC.Principal Place of Business  
2446 N ROOSEVELT BLVD  
KEY WEST FL 33040  
USMailing Address  
P.O. BOX 5382  
KEY WEST FL 33040

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

65-0413679

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

KERR, GREG  
3314 N. SIDE DR.  
#48  
KEY WEST FL 33040

## 7. Name and Address of New Registered Agent

Name Kristi Ann Mills

Street Address (P.O. Box Number is Not Acceptable)  
2446 N. Roosevelt Blvd.

City Key West

FL Zip Code 33040

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: *Kristi A Mills*

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

(NOTE: Registered Agent signature required when reinstating)

2/28/02

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  
(See criteria on back) FILE NOW!!! FEE IS \$150.00  
After May 1, 2002 Fee will be \$550.00  
Make Check Payable to Department of State10. Election Campaign Financing  
Trust Fund Contribution.  \$5.00 May Be  
Added to Fees

## 11. OFFICERS AND DIRECTORS

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

CR2E034 (9/01)

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KERR, GREG 3314 N. SIDE DR., #48 KEY WEST FL 33040	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, P Darren Mills 2446 N. Roosevelt Blvd. Key West, FL 33040	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S, T Kristi Ann Mills 2446 N. Roosevelt Blvd. Key West, FL 33040	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Kristi A Mills*

SIGNATURE WHO TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/28/02 305/296-5018  
Date Daytime Phone #

0199577

AV