

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 12, 2001 8:00 am
Secretary of State

04-12-2001 90170 015 ***158.75

DOCUMENT # P98000019062

1. Entity Name

KEYSTONE CONSTRUCTION & DEVELOPMENT GROUP OF FLO

Principal Place of Business

Mailing Address

9490 NW 24TH CT
SUNRISE FL 33322

9490 NW 24TH CT
SUNRISE FL 33322

2. Principal Place of Business

349 SW 12th AVE

3. Mailing Address

349 SW 12th AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

BOCA RATON FL

City & State

BOCA RATON, F

Zip

Country

33486 USA

Zip

Country

33486 USA

4. FEI Number

65-0817576

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KURTOCK, DOUGLAS P

9490 NW 24TH CT 349 SW 12th AVE
SUNRISE FL 33322 BOCA RATON, FL 33486
561-338-0978

Name

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

City

FL

Zip Code

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

D. P. Kurtok, PRES DOUGLAS P. KURTOCK

4-6-01

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

(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) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME D
STREET ADDRESS KURTOCK, DOUGLAS P
CITY-ST-ZIP 9490 NW 24TH CT 349 SW 12th AVE
SUNRISE FL 33322 BOCA RATON FL 33486

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME V. PRES
STREET ADDRESS PETER F. SMITH
CITY-ST-ZIP 145 WHISPERWOOD LN
HENDERSONVILLE, NC 28739

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

D. P. Kurtok, PRES DOUGLAS P. KURTOCK

Date

Daytime Phone #

4-6-01 954 344-5958

CR2E034 (10/00)