

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000037213

1. Entity Name

SIGNS & GRAPHICS OF THE KEYS INC.

Principal Place of Business

92685 OVERSEAS HIGHWAY  
TAVERNIER FL 33070

Mailing Address

92685 OVERSEAS HIGHWAY  
TAVERNIER FL 33070

2. Principal Place of Business

86500 Overseas Hwy  
Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 1236  
Suite, Apt. #, etc.

City & State

Islamorada FL

Zip 33036

Country

USA

City & State

Tavernier Fla

Zip

33070

Country

USA

6. Name and Address of Current Registered Agent

DESANTIS, JOSEPHINE  
186 INDIAN MOUND TRAIL  
TAVERNIER FL 33070

4. FEI Number

65-0917346

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

7. Name and Address of New Registered Agent

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

Josephine A DeSantis

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4-24-01

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

TITLE PD  
NAME BURDICK, ISA  
STREET ADDRESS PO BOX 1705  
CITY-ST-ZIP TAVERNIER FL 33070 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
NAME Josephine A DeSantis  
STREET ADDRESS 186 Indian Mnd  
CITY-ST-ZIP Tavernier, FL 33070 ☐ Change ☒ Addition

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

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

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

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

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

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

Josephine A DeSantis

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Josephine A DeSantis

4-24-01

852-2248

CR2E034 (10/00)

01300178



DO NOT WRITE IN THIS SPACE

FILED

Apr 27, 2001 8:00 am  
Secretary of State

04-27-2001 90303 029 \*\*\*150.00