

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000070185

1. Entity Name

KEA CONSTRUCTION INC.

FILED
Sep 18, 2000 8:00 am
Secretary of State

09-18-2000 90029 010 ***550.00

Principal Place of Business

220 S.W. 64TH WAY
 PEMBROKE PINES FL 33023

Mailing Address

220 S.W. 64TH WAY
 PEMBROKE PINES FL 33023

2. Principal Place of Business

220 SW 64th Way
 Suite, Apt. #, etc.

3. Mailing Address

220 SW 64th Way
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Pembroke Pines FL

City & State

Pembroke Pines FL

4. FEI Number

65-0933395

Applied For

Not Applicable

Zip

Country

33023 Broward

Zip

Country

33023 Broward

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BENITEZ, VALDEMAR
 220 S.W. 64TH WAY
 PEMBROKE PINES FL 33023

7. Name and Address of New Registered Agent

Name Benitez Valdemar

Street Address (P.O. Box Number is Not Acceptable)
 220 SW 64th Way

City Pembroke Pines FL Zip Code 33023

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

Valdemar Benitez / President 08-01-00

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 D ☐ Delete
 NAME BENITEZ, VALDEMAR
 STREET ADDRESS 220 S.W. 64TH WAY
 CITY-ST-ZIP PEMBROKE PINES FL 33023

TITLE ☐ Delete
 NAME BENITEZ ALMA
 STREET ADDRESS 220 SW 64th Way
 CITY-ST-ZIP Pembroke Pines FL 33023

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Benitez Valdemar ☐ Change ☐ Addition
 NAME Benitez Valdemar
 STREET ADDRESS 220 SW 64th Way
 CITY-ST-ZIP Pembroke Pines FL 33023

TITLE ☐ Change ☒ Addition
 NAME Benitez Alma
 STREET ADDRESS 220 SW 64th Way
 CITY-ST-ZIP Pembroke Pines FL 33023

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

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

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

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

08-01-00 (954) 989 7898

Date

Daytime Phone #

CR2E034 (5/00)