

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 04, 2001 8:00 am
Secretary of State
 04-04-2001 90128 014 ***150.00

0108667

DOCUMENT # P99000070185

1. Entity Name
KEA CONSTRUCTION INC.

Principal Place of Business

220 SW 64TH WAY
 PEMBROKE PINES FL 33023

Mailing Address

220 SW 64TH WAY
 PEMBROKE PINES FL 33023

2. Principal Place of Business

3. Mailing Address

220 S.W. 64th. Way
 Suite, Apt. #, etc.

220 S.W. 64th. Way
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
Pembroke Pines Florida

City & State
Pembroke Pines, Florida

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

7. Name and Address of New Registered Agent

BENITEZ, VALDEMAR
220 SW 64TH WAY
PEMBROKE PINES FL 33023

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

(NOTE: Registered Agent signature required when reinstating)

DATE

04-02-01

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
 NAME **BENITEZ, VALDEMAR**
 STREET ADDRESS **220 SW 64TH WAY**
 CITY-ST-ZIP **PEMBROKE PINES FL 33023**

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

TITLE **D** ☐ Delete
 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 ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Valdemar Benitez

Date

Daytime Phone #

04-02-01 (954) 989 7898

CR2E034 (10/00)