

# 2000 UNIFORM BUSINESS REPORT (UBR)

3/4/00-90061-050-\$150.00-\$150.00 page 1 of 2

DOCUMENT # P990000082464

1. Entity Name

KEY CONSTRUCTION, INC.

FILED

00 MAR 20 PM 3:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

ISABEL ESTE RD.  
BOCA RATON FL 33486

1455 ISABEL ESTE RD.  
BOCA RATON FL 33486

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

PO Box 1452

BOCA RATON FL

33429

4. FEI Number

65-0948648

Applied For

Not Applicable

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

HCRM CORP.  
2200 CORPORATE BLVD., N.W., STE. 401  
BOCA RATON FL 33431

Name

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

3841 N.E. 24TH AVE

LIGHT HOUSE POINT

City

FL

Zip Code

33064

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 resigning)

JOSEPH HUMMER SECRETARY

3/24/00

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, 2000 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                      | <input checked="" type="checkbox"/> Delete |
| NAME           | CAVOSSA, ELIZABETH     |  |
| STREET ADDRESS | 23181 FOUNTAINVIEW RD. |  |
| CITY-ST-ZIP    | BOCA RATON FL 33433    |  |
| TITLE          |                        | <input type="checkbox"/> Delete            |
| NAME           |                        |  |
| STREET ADDRESS |                        |  |
| CITY-ST-ZIP    |                        |  |
| TITLE          |                        | <input type="checkbox"/> Delete            |
| NAME           |                        |  |
| STREET ADDRESS |                        |  |
| CITY-ST-ZIP    |                        |  |
| TITLE          |                        | <input type="checkbox"/> Delete            |
| NAME           |                        |  |
| STREET ADDRESS |                        |  |
| CITY-ST-ZIP    |                        |  |
| TITLE          |                        | <input type="checkbox"/> Delete            |
| NAME           |                        |  |
| STREET ADDRESS |                        |  |
| CITY-ST-ZIP    |                        |  |
| TITLE          |                        | <input type="checkbox"/> Delete            |
| NAME           |                        |  |
| STREET ADDRESS |                        |  |
| CITY-ST-ZIP    |                        |  |

|                |                       |  |
|----------------|-----------------------|--|
| TITLE          | PRESIDENT             | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           | BRUCE CAVOSSA         |  |
| STREET ADDRESS | 23181 FOUNTAINVIEW RD |  |
| CITY-ST-ZIP    | BOCA RATON, FL 33433  |  |
| TITLE          | SECRETARY             | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME           | JOSEPH HUMMER         |  |
| STREET ADDRESS | PO Box 1452           |  |
| CITY-ST-ZIP    | BOCA RATON, FL 33429  |  |
| TITLE          |                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME           |                       |  |
| STREET ADDRESS |                       |  |
| CITY-ST-ZIP    |                       |  |
| TITLE          |                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME           |                       |  |
| STREET ADDRESS |                       |  |
| CITY-ST-ZIP    |                       |  |
| TITLE          |                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME           |                       |  |
| STREET ADDRESS |                       |  |
| CITY-ST-ZIP    |                       |  |
| TITLE          |                       | <input type="checkbox"/> Change <input type="checkbox"/> 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 data empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOSEPH HUMMER SECRETARY

Date

Daytime Phone #

TS

561-985-0911

CR2E034 (9/99)



KEY Construction Inc.

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"THE KEY TO ALL YOUR SITE PROBLEMS"

MARCH 17, 2000

FLORIDA DEPARTMENT OF STATE  
P O BOX 6327  
TALLAHASSEE, FL 32314

REFERENCE #: P99000082464

AS PER THE ATTACHED REQUEST PLEASE DESIGNATE

JOSEPH HUMMEL  
3841 N E 24TH AVENUE  
LIGHTHOUSE PT., FL 33064

IF YOU REQUIRE ANY ADDITIONAL INFORMATION PLEASE LET ME KNOW. THANK  
YOU FOR YOUR SERVICES.

SINCERELY

JOSEPH HUMMEL, SECT.