

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V23180

1. Entity Name

KETA'S CHRISTMAS COMPANY, INC.

Principal Place of Business

489 JOHN KNOX ROAD  
TALLAHASSEE FL 32303

Mailing Address

489 JOHN KNOX ROAD  
TALLAHASSEE FL 32303

2. Principal Place of Business

2060 ANGUS ST

Suite, Apt. # etc.

Tallahassee

City & State

FLORIDA

Zip

32311

Country

LEON

3. Mailing Address

Suite, Apt. # etc.

STATE

City & State

Zip

Country

4. FEI Number

59-3116127

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BIRO, M KETA  
2060 ANGUS ST  
TALLAHASSEE FL 32311

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

*Andrew K. Biro*

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

TITLE NAME ☐ Delete

P  
BIRO, M. KETA  
2060 ANGUS ST  
TALLAHASSEE FL 32311

TITLE NAME ☐ Delete

ST  
BIRO, ANDREW K.  
2060 ANGUS ST.  
TALLAHASSEE FL 32311

TITLE NAME ☐ Delete

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☐ Change ☐ Addition

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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:

*Andrew K. Biro*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED  
May 01, 2001 8:00 am  
Secretary of State

05-01-2001 90101 011 \*\*\*155.00

800000340



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)

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