

City of Key West
Planning Department



Verification Form

(Where Authorized Representative is an individual)

I, Pinky Singh, being duly sworn, depose and say that I am the Authorized Representative of the Owner (as appears on the deed), for the following property identified as the subject matter of this application:

501 Southard St. Key West, FL-33040
Street address of subject property

All of the answers to the above questions, drawings, plans and any other attached data which make up the application, are true and correct to the best of my knowledge and belief. In the event the City or the Planning Department relies on any representation herein which proves to be untrue or incorrect, any action or approval based on said representation shall be subject to revocation.

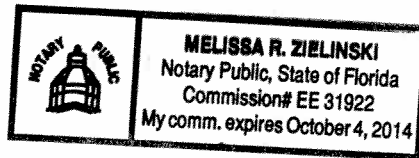
Pinky Singh
Signature of Authorized Representative

Subscribed and sworn to (or affirmed) before me on this 01/18/2012 by
date

PINKY SINGH
Name of Authorized Representative

He/She is personally known to me or has presented FL Drivers License as identification.

Melissa R Zielinski
Notary's Signature and Seal



Melissa R Zielinski
Name of Acknowledger typed, printed or stamped

EE 31922
Commission Number, if any



City of Key West
Planning Department



Authorization Form
(Where Owner is a Business Entity)

Please complete this form if someone other than the owner is representing the property owner in this matter.

I, SANDEEP ESARI SINGH as
Please Print Name of person with authority to execute documents on behalf of entity

TREASURER of KEY WEST OFFICE MANAGEMENT
Name of office (President, Managing Member) Name of owner from deed

authorize PINKY SINGH
Please Print Name of Representative

to be the representative for this application and act on my/our behalf before the City of Key West.

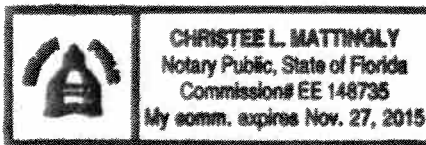
Sandeep E Singh
Signature of person with authority to execute documents on behalf on entity owner

Subscribed and sworn to (or affirmed) before me on this Jan 18 2012 by
date

Sandeep E Singh
Name of Authorized Representative

He/She is personally known to me or has presented FL DL J520785692200 as identification.
EXP. 06.20.17

Christee Mattingly
Notary's Signature and Seal



Christee Mattingly
Name of Acknowledger typed, printed or stamped

EE 148735
Commission Number, if any



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No Name History

Detail by Officer/Registered Agent Name

Florida Profit Corporation

KEY WEST OFFICE MANAGEMENT, INC.

Filing Information

Document Number 627894
FEI/EIN Number 591924941
Date Filed 06/28/1979
State FL
Status ACTIVE
Last Event CANCEL ADM DISS/REV
Event Date Filed 10/13/2003
Event Effective Date NONE

Principal Address

501 SOUTHARD ST.
KEY WEST FL 33040

Mailing Address

501 SOUTHARD ST.
KEY WEST FL 33040

Registered Agent Name & Address

PEGASUS INTERNATIONAL HOTEL
501 SOUTHARD TSREET
KEY WEST FL 33040 US

Name Changed: 01/03/2012

Address Changed: 02/15/2011

Officer/Director Detail

Name & Address

Title P

SINGH, ESHRI DR.
501 SOUTHARD ST.
KEY WEST FL 33040 US

Title V

SINGH, GULSHAN MRS.
501 SOUTHARD ST.
KEY WEST FL 33040 US

Title T

SINGH, SANDEEP ESHRI DR.

501 SOUTHARD STREET
KEY WEST FL 33040 US

Annual Reports

Report Year Filed Date

2010	04/23/2010
2011	02/15/2011
2012	01/03/2012

Document Images

- [01/03/2012 -- ANNUAL REPORT](#)
- [02/15/2011 -- ANNUAL REPORT](#)
- [04/23/2010 -- ANNUAL REPORT](#)
- [04/30/2009 -- ANNUAL REPORT](#)
- [04/21/2008 -- ANNUAL REPORT](#)
- [01/04/2007 -- ANNUAL REPORT](#)
- [05/01/2006 -- ANNUAL REPORT](#)
- [01/28/2005 -- ANNUAL REPORT](#)
- [07/02/2004 -- ANNUAL REPORT](#)
- [10/13/2003 -- REINSTATEMENT](#)
- [03/22/2002 -- ANNUAL REPORT](#)
- [02/14/2001 -- ANNUAL REPORT](#)
- [05/10/2000 -- ANNUAL REPORT](#)
- [09/17/1999 -- ANNUAL REPORT](#)
- [04/28/1998 -- ANNUAL REPORT](#)
- [01/15/1997 -- ANNUAL REPORT](#)
- [02/28/1996 -- ANNUAL REPORT](#)
- [03/08/1995 -- ANNUAL REPORT](#)

Note: This is not official record. See documents if question or conflict.

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