


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2008 08:00 AM
Secretary of State

DOCUMENT # 547085
 1. Entity Name
K & B INVESTMENT CORPORATION



Principal Place of Business 11925 S.W. 128 ST. P.O. BOX 161859 MIAMI, FL 33186 US	Mailing Address 11925 S.W. 128 ST. P.O. BOX 161859 MIAMI, FL 33186 US
--	--

DO NOT WRITE IN THIS SPACE



01072008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1816035	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JOANNOU, BEN
 11925 S.W. 128 ST.
 MIAMI, FL 33186

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JOANNOU, BEN 10155 SW 124 AVE MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T JOANNOU, JR., BEN 8401 SW 134 DRIVE MIAMI, FL 33156
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD GURDJIAN, JACQUES 8050 SW 157 ST MIAMI, FL 33158
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD JOANNOU, CRYSTAL 7260 SW 105 TERR MIAMI, FL 33156
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000778291
 01/10/08-80042-018 150.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Crystal Joannou **CRYSTAL JOANNOU** 305-238-1866 1/7/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #