## 2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K04535

**Entity Name: AKB MANAGEMENT COMPANY** 

**Current Principal Place of Business:** 

2655 S. LEJEUNE ROAD SUITE 314 CORAL GABLES, FL 33134

## **Current Mailing Address:**

2655 S. LEJEUNE ROAD SUITE 314 CORAL GABLES, FL 33134 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

BLAIRE, BONNIE 2655 S. LEJEUNE ROAD SUITE 314 CORAL GABLES, FL 33134 US

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:

Electronic Signature of Registered Agent

Date

FILED Mar 04, 2024

**Secretary of State** 

1321093578CC

## Officer/Director Detail:

Title PD Title T/D

Name BLAIRE, BONNIE Name BLAIRE, ADAM

Address 2655 S. LEJEUNE ROAD STE 314 Address 2655 S. LEJEUNE ROAD STE 314

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title VP/D Title DIRECTOR, VP
Name BLAIRE, KAREN Name CORREA, MARIA L.

Address 2655 S. LEJEUNE ROAD Address 2655 S. LEJEUNE ROAD

SUITE 314

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

#314

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.