

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000091472

**Entity Name:** KITEDESK, INC.

**Current Principal Place of Business:**

405 S. DALE MABRY SUITE 208  
TAMPA, FL 33609

**Current Mailing Address:**

405 S. DALE MABRY SUITE 208  
TAMPA, FL 33609 US

**FEI Number: 45-3632400**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

MB OPERATIONS, LLC  
1700 S. MACDILL AVE  
220  
TAMPA, FL 33629 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

**Officer/Director Detail :**

Title P, D  
Name RODRIGUEZ, JARED  
Address 1120 W. PENINSULAR ST.  
City-State-Zip: TAMPA FL 33603

Title VP,D  
Name KENNEDY, JOHN  
Address 694 CHESAPEAKE DR.  
City-State-Zip: TARPON SPRINGS FL 34689

Title D  
Name MOSLEY, SIG  
Address 1120 W. PENINSULAR ST.  
City-State-Zip: TAMPA FL 33603

Title D  
Name BERTRON, STEWART  
Address 1120 W. PENINSULAR ST.  
City-State-Zip: TAMPA FL 33603

Title D  
Name AEGERTER, DANIEL  
Address 1120 W. PENINSULAR ST.  
City-State-Zip: TAMPA FL 33603

*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.*

**SIGNATURE: JARED RODRIGUEZ**

**PRESIDENT**

**04/14/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date