# 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000028751

Entity Name: ICUBE CONSULTANCY SERVICES, INC.

# **Current Principal Place of Business:**

4110 SOUTH POINT BLVD SUITE 213 JACKSONVILLE, FL 32216

### **Current Mailing Address:**

9838 BAYMEADOWS RD. SUITE 310 JACKSONVILLE, FL 32256

# FEI Number: 59-3436403

### Name and Address of Current Registered Agent:

CAMP, RICHARD 4110 SOUTHPOINT BLVD #205 JACKSONVILLE, FL 32216 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

#### **Officer/Director Detail :**

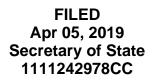
Title	CEO	Title	MGRM
Name	KIRAN, KALA K	Name	VIJAYASHREE, KALA
Address	8602, HUNTERS CREEK DR S	Address	8602 HUNTERS CREEK DR S
City-State-Zip:	JACKSONVILLE FL 32256	City-State-Zip:	JACKSONVILLE FL 32256
Title	MGRM		
Name	KURAVI, SARATH K		
Address	1003, GARRISON DRIVE		
City-State-Zip:	ST. AUGUSTINE FL 32092		

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.

CEO

### SIGNATURE: KIRAN K KALA

Electronic Signature of Signing Officer/Director Detail



Certificate of Status Desired: Yes

04/05/2019 Date

Date