

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000047274

Entity Name: KM OF JACKSONVILLE, INC.**Current Principal Place of Business:**6947 MERRILL RD
JACKSONVILLE, FL 32277**Current Mailing Address:**5924 COVERED CREEK LN
JACKSONVILLE, FL 32277 US**FEI Number:** 59-3577076**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PATEL, RASIKLAL K
1523 CESERY TERR.
JACKSONVILLE, FL 32211 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
Name	PATEL, RASIKLAL K
Address	1523 CESERY TERRACE
City-State-Zip:	JACKSONVILLE FL 32211

Title	T
Name	PATEL, NIRMALA R
Address	1523 CESERY TERRACE
City-State-Zip:	JACKSONVILLE FL 32211

Title	V
Name	PATEL, VIPUL
Address	5924 COVERED CREEK LN
City-State-Zip:	JACKSONVILLE FL 32277

Title	S
Name	PATEL, MEENA
Address	5924 COVERED CREEK LN
City-State-Zip:	JACKSONVILLE FL 32277

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: VIPUL PATEL

VP

03/31/2021

Electronic Signature of Signing Officer/Director Detail_____
Date