

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Jan 10, 2006 08:00 AM
Secretary of State**

DOCUMENT # L02000001794

1. Entity Name

KJ RETAIL CONSULTING, LLC



Principal Place of Business
4220 BEACH PARK DRIVE
TAMPA, FL 33609

Mailing Address
4220 BEACH PARK DRIVE
TAMPA, FL 33609



01072006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

JORDAN, KARYL S
4220 BEACH PARK DRIVE
TAMPA, FL 33609

**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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM
NAME JORDAN, KARYL S
STREET ADDRESS 4220 BEACH PARK DRIVE
CITY-ST-ZIP TAMPA, FL 33609

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CITY-ST-ZIP

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01/11/06-80050-013 50.00

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IN THIS SPACE**

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Karyl S. Jordan

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1-7-06

Date

813-695-3765

Daytime Phone #