

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000045205

Entity Name: KLM OF SOUTH FLORIDA, INC.

FILED
Mar 01, 2009
Secretary of State

Current Principal Place of Business:

11300 SW 175TH ST
MIAMI, FL 33157

New Principal Place of Business:

Current Mailing Address:

11300 SW 175TH ST
MIAMI, FL 33157

New Mailing Address:

FEI Number: 65-0283278

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOSS, KEITH
11300 SW 175TH ST
MIAMI, FL 33157 US

Name and Address of New Registered Agent:

MOSS, KEITH L PD
11300 SW 175TH ST
MIAMI, FL 33157 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: KEITH L. MOSS

03/01/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MOSS, KEITH PD
Address: 11300 SW 175TH ST
City-St-Zip: MIAMI, FL 33157

Title: VP () Delete
Name: HIGGS, VOLRICK VP
Address: 11300 SW 175TH ST
City-St-Zip: MIAMI, FL 33157

Title: S () Delete
Name: LIGHTBURN, GEORGE S
Address: 17411 N.W. 48TH AVENUE
City-St-Zip: MIAMI, FL 33055

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MOSS, KEITH L PD
Address: 11300 SW 175TH ST
City-St-Zip: MIAMI, FL 33157

Title: VP (X) Change () Addition
Name: LIGHTBURN, GEORGE VP
Address: 11300 SW 175TH ST
City-St-Zip: MIAMI, FL 33157

Title: S (X) Change () Addition
Name: MOSS, KEITH L S
Address: 11300 SW 175TH STREET
City-St-Zip: MIAMI, FL 33157

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: KEITH L. MOSS

PD

03/01/2009

Electronic Signature of Signing Officer or Director

Date