

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P02000043094

1. Entity Name
KALEB CONSULTING, INC.



Principal Place of Business
5802A EAST FOWLER AVENUE SUITE 144
TEMPLE TERRACE, FL 33617

Mailing Address
5802A EAST FOWLER AVENUE SUITE 144
TEMPLE TERRACE, FL 33617

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 JUN -3 AM 8:00

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05012004 No Chg-P CR2E034 (10/03)

4. FEI Number
03-0431922 Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BRAMBLE, GEMMA
5802A EAST FOWLER AVENUE
SUITE 144
TAMPA, FL 33617

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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 GEMMA BRAMBLE, PRESIDENT 04.25.04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS: \$550.00
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME BRAMBLE, GEMMA
STREET ADDRESS 5802A EAST FOWLER AVENUE SUITE 144
CITY-ST-ZIP TEMPLE TERRACE, FL 33617

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: GEMMA BRAMBLE 04.25.04 813.988.6747
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #