

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000034659

Entity Name: KIM BROWN & ASSOCIATES, INC.

**FILED**  
**Jan 25, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2841 N OCEAN BLVD #905  
FT LAUDERDALE, FL 33308

**New Principal Place of Business:**

**Current Mailing Address:**

2841 N OCEAN BLVD #905  
FT LAUDERDALE, FL 33308

**New Mailing Address:**

FEI Number: 75-3146761

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BROWN, KIM  
2841 N OCEAN BLVD #905  
FT LAUDERDALE, FL 33308 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: DPVS  
Name: BROWN, KIM  
Address: 2841 N OCEAN BLVD #905  
City-St-Zip: FT LAUDERDALE, FL 33308

Title: T  
Name: BROWN, KIM  
Address: 2841 N OCEAN BLVD #905  
City-St-Zip: FT LAUDERDALE, FL 33308

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: KIM BROWN

P

01/25/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date