

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000170392

Entity Name: K.B. SHARP, P.A.

FILED
Apr 30, 2007
Secretary of State

Current Principal Place of Business:

12323 S.W. 55TH STREET
SUITE 1002
COOPER CITY, FL 33330

New Principal Place of Business:

180 N.W. 183RD ST
SUITE 117
MIAMI, FL 33169

Current Mailing Address:

12323 S.W. 55TH STREET
SUITE 1002
COOPER CITY, FL 33330

New Mailing Address:

180 N.W. 183RD ST
SUITE 117
MIAMI, FL 333169

FEI Number: 20-2035141

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHARP, KISHASHA
12323 S.W. 55TH STREET
SUITE 1002
COOPER CITY, FL 33330 US

Name and Address of New Registered Agent:

SHARP, KISHASHA
180 N.W. 183RD ST
SUITE 117
MIAMI, FL 33169 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:

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P, D () Delete
Name: SHARP, KISHASHA
Address: 12323 S.W. 55TH STREET
City-St-Zip: COOPER CITY, FL 33330

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P, D (X) Change () Addition
Name: SHARP, KISHASHA
Address: 180 N.W. 183RD ST SUITE 117
City-St-Zip: MIAMI, FL 33169

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: KISHASHA SHARP

P

04/30/2007

Electronic Signature of Signing Officer or Director

Date