2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000088953

FILED Mar 27, 2007 Secretary of State

Entity Name: K & A BROWN PROFESSIONAL SERVICES CORPORATION

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
18110 NW MIAMI, FL	/ 9TH AVE. 33169				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
18110 NW MIAMI, FL	/ 9TH AVE. 33169				
FEI Number	: 20-3071633	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
	-BROWN, ALIC / 9TH AVE. 33169 US	CIA			
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATU	RE:				
	Electron	ic Signature of Registered Age	ent	Date	
Election Ca		ic Signature of Registered Ago Trust Fund Contribution().	ent	Date	
		g Trust Fund Contribution ().		Date SES TO OFFICERS AND DIRECTORS	
OFFICER Fitle: Name: Address:	mpaign Financing	Trust Fund Contribution (). TORS: Delete VN, ALICIA AVE.			
OFFICER Title: Name: Address: Dity-St-Zip: Title: Name: Address:	S AND DIREC P () RITCHEY-BRO 18110 NW 9TH MIAMI, FL 331	TORS: Delete WN, ALICIA AVE. 69 Delete ON K AVE.	ADDITIONS/CHANG Title: Name: Address:	ES TO OFFICERS AND DIRECTORS	
	P () RITCHEY-BROW 18110 NW 9TH MIAMI, FL 3310 V () BROWN, MARIE 18110 NW 9TH MIAMI, FL 3310	Trust Fund Contribution (). TORS: Delete MN, ALICIA AVE. 69 Delete DN K AVE. 69 Delete H ST.	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	ES TO OFFICERS AND DIRECTORS () Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: ALICIA RITCHEY-BROWN P 03/27/2007