# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 20, 2012**
**Secretary of State**

DOCUMENT# P05000105833

**Entity Name:** KJB RECOVERY INC

**Current Principal Place of Business:**

5304 1ST AVE N.
SAINT PETERSBURG, FL 33710

**New Principal Place of Business:**

**Current Mailing Address:**

5304 1ST AVE N.
SAINT PETERSBURG, FL 33710

**New Mailing Address:**

**FEI Number: 20-3486743** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

BREADING, KEITH J MR
5304 1ST AVE N
SAINT PETERSBURG, FL 33710 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: PRES
Name: BREADING, KEITH J MR
Address: 5304 1ST AVE N
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: D
Name: BREADING, LENA D MRS
Address: 5304 1ST AVE M
City-St-Zip: SAINT PETERSBURG, FL 33710

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: KEITH BREADING MR 03/20/2012

Electronic Signature of Signing Officer or Director Date