

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 27, 2007 8:00 am
Secretary of State

04-27-2007 90191 036 ***150.00

DOCUMENT # P05000162467

1. Entity Name
JKB CONSULTING & PROFESSIONAL SERVICES INC.



Principal Place of Business

**1749 N.E. MIAMI CT
211
MIAMI, FL 33132**

Mailing Address

**1749 N.E. MIAMI CT.
211
MIAMI, FL 33132**

DO NOT WRITE IN THIS SPACE



04102007 No Chg-P CR2E034 (11/05)

4. FEI Number
04-3835152

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BRIAN PRZYSTUP & ASSOCIATES LLC
1881 WASHINGTON AVE.
12-E
M.BEACH, FL 33139**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P/D
BAGGE, JOCELYN K
1749 N.E. MIAMI CT #211
MIAMI, FL 33132**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

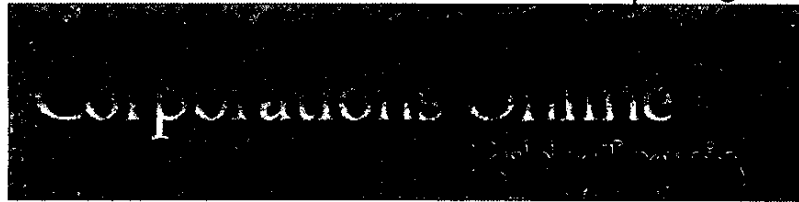
Daytime Phone #

4-10-07 305.333.0264

ATTACHMENT

http://www.sunbiz.org/scripts/cordet.exe?a1=DETFIL&n1=P050001...

40085689



Florida Profit

JKB CONSULTING & PROFESSIONAL SERVICES INC.

PRINCIPAL ADDRESS

1749 N.E. MIAMI CT
211
MIAMI FL 33132
Changed 03/13/2006

MAILING ADDRESS

1749 N.E. MIAMI CT.
211
MIAMI FL 33132
Changed 03/13/2006

Document Number

P05000162467

FEI Number

043835152

Date Filed

12/13/2005

State

FL

Status

ACTIVE

Effective Date

12/09/2005

Registered Agent

Name & Address
BRIAN PRZYSTUP & ASSOCIATES LLC 1881 WASHINGTON AVE. 12-E M.BEACH FL 33139

Officer/Director Detail

Name & Address	Title
BAGGE, JOCELYN K 1749 N.E. MIAMI CT #211 MIAMI FL 33132	P/D

ATTACHMENT

40085689

Annual Reports

#P05000162467

Report Year	Filed Date
2006	03/13/2006

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No Events

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