2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000095081

Entity Name: KD CONSULTING & APPRAISAL GROUP, INC.

FILED Jan 19, 2009 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
7112 SW 4 MIAMI, FL	47TH STREET 33155				
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
7112 SW 4 MIAMI, FL	47TH STREET 33155				
FEI Number	: 20-5223979	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	l Address of (Current Registered Agent:	Name and Address	of New Registered Agent:	
	LL, KC ONUT CREE! T CREEK, FL				
	e named entity e of Florida.	submits this statement for the po	urpose of changing its register	ed office or registered agent, or both,	
SIGNATUI	RE:				
		nic Signature of Registered Age	nt	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (KAISER, JEFF 7112 SW 47TH MIAMI, FL 331		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (X DOW, HENRY 7112 SW 47TH MIAMI, FL 331		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (LEE, THOR 7112 SW 47TH MIAMI, FL 331		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S (PERRINE, PET 7112 SW 47TH MIAMI, FL 331	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T (SERFASS, DA' 7112 SW 47TH MIAMI, FL 331	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: JEFF KAISER P 01/19/2009