

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000072164

Entity Name: JUBILEE CONSULTANTS INC

**FILED**  
**Jan 26, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

6767 COLLINS AVE #2105  
MIAMI BEACH, FL 33141

**New Principal Place of Business:**

**Current Mailing Address:**

6767 COLLINS AVE #2105  
MIAMI BEACH, FL 33141

**New Mailing Address:**

FEI Number: 26-0419647

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PARRA, ANGELA MD  
6767 COLLINS AVE #2105  
MIAMI BEACH, FL 33141 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: VP  
Name: PARRA, ANGELA  
Address: 6767 COLLINS AVE #2105  
City-St-Zip: MIAMI BEACH, FL 33141

Title: P  
Name: FLICKINGER, JOHN S  
Address: 6767 COLLINS AVE #2105  
City-St-Zip: MIAMI BEACH, FL 33141

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: JOHN FLICKINGER

P

01/26/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date