

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2002 8:00 am
Secretary of State

04-09-2002 90038 038 ***150.00

DOCUMENT # P95000022471

1. Entity Name

KLK CONSULTING, INC.

Principal Place of Business

~~2621 W GRAND RESERVE CIRCLE~~

~~#411~~

~~CLEARWATER FL 33759~~

~~US~~

Mailing Address

P.O. BOX 17643

CLEARWATER FL 33762

US

2. Principal Place of Business

NONE AT THIS TIME

3. Mailing Address

SAME AS ABOVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0567954

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KAYSER, KAREN L.

~~2621 W GRAND RESERVE CIRCLE, #411~~

~~CLEARWATER FL 33759~~

Name

Street Address (P.O. Box Number is Not Acceptable)

11850 9th ST NORTH, # 7111

City

ST. PETERSBURG

FL

Zip Code

33716

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.

SIGNATURE

Karen L. Kayser

KAREN L. KAYSER

3/31/2002

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)



FILE NOW!!! FEE IS \$150.00

After May 1, 2002 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DPVT** ☐ Delete
NAME **KAYSER, KAREN L**
STREET ADDRESS ~~2621 W GRAND RESERVE CIRCLE #411~~
CITY-ST-ZIP ~~CLEARWATER FL 33759~~

TITLE **DPVT3** ☒ Change ☐ Addition
NAME **KAYSER KAREN L**
STREET ADDRESS **P.O. BOX 17643**
CITY-ST-ZIP **CLEARWATER, FL 33762**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Karen L. Kayser

KAREN L. KAYSER

3/31/2002

813-301-2002

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0457497 AV

CR2E034 (9/01)