APPROVED AND FILED

03 SEP 24 PM 7:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

55033523

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

1. Entity Name: KJM Financial Inc.
V36806

DO NOT WRITE IN THIS SPACE

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2. Principal Place of Business	3. Mailing Address
9080 NW 12 St.	9080 NW 12 St
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Plantation FL.	City & State: Plantation, FL.
Zip: 33322 Country: BROWARD	Zip: 33322 Country: BROWARD

4. FEI Number: 65-0332742 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: William Bennis

Street Address (P.O. Box Number is Not Acceptable): 1504 Whitehall Dr. #105

City: Ft. Lauderdale FL Zip Code: 33324

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: William Bennis
Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent Signature required when reinstating) DATE

January 1 - May 1 Fee Is $150.00
After May 1, Fee Is $550.00
Amended UBR Is $61.25
Make Check Payable to Florida Department of State

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	William Bennis PRESIDENT 9080 NW 12 St. Plantation, FL. 33322
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
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CR2E034B (12/02)

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: William Bennis