## 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000059662

Entity Name: M.B. KLAMA, INC.

**Current Principal Place of Business:** 

**617 1ST AVE NO** 

JACKSONVILLE BEACH, FL 32250

**Current Mailing Address:** 

**617 1ST AVE NO** 

JACKSONVILLE BEACH, FL 32250

FEI Number: 59-3398100 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KLAMA, BRUCE E 617 1ST AVE NORTH JACKSONVILLE BEACH, FL 32250 US

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

FILED Jan 27, 2014

**Secretary of State** 

CC5625883998

Officer/Director Detail:

Title VP Title

Name KLAMA, BRUCE E Name KLAMA, MARY T

Address 555 GRANADA TERRACE Address 555 GRANDADA TERRACE

City-State-Zip: PONTE VEDRA BEACH FL 32082 City-State-Zip: PONTE VEDRA BEACH FL 32082

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.

**VP** 

SIGNATURE: BRUCE KLAMA