

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 09, 2005 8:00 am**  
**Secretary of State**

02-09-2005 90042 018 \*\*\*150.00

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                  |                                                                                                                                         |                                                                   |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|
| <b>DOCUMENT # P00000010193</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                  |                                                        |                                                                   |
| 1. Entity Name<br><b>JOSS INTERNATIONAL CORPORATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                  |                                                                                                                                         |                                                                   |
| Principal Place of Business<br><b>1582 WEST 68 STREET<br/>HIALEAH FL 33014</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                  | Mailing Address<br><b>1582 WEST 68 STREET<br/>HIALEAH FL 33014</b>                                                                      |                                                                   |
| 2. Principal Place of Business                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                  | 3. Mailing Address<br><b>16140 E TROON CIRCLE</b>                                                                                       |                                                                   |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                  | Suite, Apt. #, etc.<br><b>MIAMI LAKES</b>                                                                                               |                                                                   |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                  | City & State<br><b>FL</b>                                                                                                               |                                                                   |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Country                                                                                                          | Zip                                                                                                                                     | Country                                                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                  | <b>33014</b>                                                                                                                            | <b>USA</b>                                                        |
| 4. FEI Number<br><b>65-0980252</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                  | Applied For<br><input type="checkbox"/> Not Applicable                                                                                  |                                                                   |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                  | <b>\$8.75</b> Additional Fee Required                                                                                                   |                                                                   |
| 6. Name and Address of Current Registered Agent<br><b>MENDIGUTIA, FELIX J<br/>8370 W FLAGLER STREET<br/>SUITE 238<br/>MIAMI FL 33144</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                  | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br><b>FL</b> Zip Code |                                                                   |
| 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 _____ (NOTE: Registered Agent signature required when reinstating)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                  |                                                                                                                                         |                                                                   |
| <b>FILE NOW!!! FEE: \$150.00</b><br><b>After May 1, 2005 Fee Will Be \$550.00</b><br><b>Make Check Payable to Florida Department of State</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                  |                                                                                                                                         |                                                                   |
| 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                  | <b>\$5.00</b> May Be Added to Fees                                                                                                      |                                                                   |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                  | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11                                                                                   |                                                                   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | D<br>MENDIGUTIA, JOSE ANTONIO<br>16140 EAST TROON CIRCLE<br>MIAMI LAKES FL 33014 <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | D<br>MENDIGUTIA, ODALYS<br>16140 EAST TROON CIRCLE<br>MIAMI LAKES FL 33014 <input type="checkbox"/> Delete       | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> Delete                                                                                  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> Delete                                                                                  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> Delete                                                                                  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> Delete                                                                                  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 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 Block 11 if changed, or on an attachment with an address, with another like empowered. |                                                                                                                  |                                                                                                                                         |                                                                   |
| SIGNATURE: _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                  | Date: <b>2/4/05</b>                                                                                                                     |                                                                   |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR<br><b>JOSE A MENDIGUTIA</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                  | Daytime Phone # <b>305 557 6969</b>                                                                                                     |                                                                   |