2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006
Secretary of State

DOCUMENT# 170882

Entity Name: JOE DANIEL, INC.

Current Principal Place of Business:

P.O. BOX 4944
16400 NW 57 AVE.
HIALEAH, FL 33014

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 4944
16400 NW 57 AVE.
HIALEAH, FL 33014

New Mailing Address:

FEI Number: 59-0709883 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MEADOR, DOTTI CAPELETTI
16401 N.W. 58 AVENUE
HIALEAH, FL 33014 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D (X) Delete
Name: PERENO, A. J.,
Address: 1360 MENDAVIA
City-St-Zip: CORAL GABLES, FL

Title: D ( ) Delete
Name: MEADOR, D.C.,
Address: 15900 W. PRESTWICK PLACE
City-St-Zip: MIAMI LAKES, FL

Title: SD (X) Delete
Name: GREENWELL, W. R.,
Address: 14531 SABAL PLAM DR.
City-St-Zip: HIALEAH, FL

Title: PD ( ) Delete
Name: CAPELETTI, J.D.,
Address: 4918 EXETER ESTATE LANE
City-St-Zip: LAKE WORTH, FL

Title: TD ( ) Delete
Name: KITCHENS, O.L.,
Address: 4600 JACKSON ST.
City-St-Zip: HOLLYWOOD, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: MEADOR, DOTTI C.,
Address: 15900 W. PRESTWICK PLACE
City-St-Zip: MIAMI LAKES, FL

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DOTTI C. MEADOR D 04/27/2006

Electronic Signature of Signing Officer or Director — Date