2005 FOR PROFIT CORPORATION

Apr 15, 2005 08:00 AM Secretary of State ANNUAL REPORT **DOCUMENT # J81155** 1. Entity Name JOYCE'S GIRLS, INC. Mailing Address Principal Place of Business 5704 MARLIN COURT -5704 MARLIN COURT US JACKSONVILLE, FL 32277 US JACKSONVILLE, FL 32277 CR2E034 (10/03) 04132005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2821171 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent JAWORSKY, JOANN R DO NOT WRITE 5704 MARLIN COURT JACKSONVILLE, FL 32277 IN THIS SPACE 3. 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 1 am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution Added to Fees 10. OFFICERS AND DIRECTORS **PSVT** TITLE Ú00000308695 JAWORSKY, JOANN R. NAME 04/16/05-80008-005 158.75 5704 MARLIN COURT STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL TITLE NAM? STREET ADDRESS City-St-ZiP TITLE ting highly fiftings in letter to a con-NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes 1 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

STREET ADDRESS CITY-ST-ZIP

SIGNATURE: JOHNN R. JAWORSKY