


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2005 08:00 AM
Secretary of State

DOCUMENT # L00000009020
 1. Entity Name
JOIELLE, LLC



Principal Place of Business 6421 CONGRESS AVE., #107 BOCA RATON, FL 33487	Mailing Address 6421 CONGRESS AVE., #107 BOCA RATON, FL 33487
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DO NOT WRITE IN THIS SPACE



04062005No Chg-LLC CR2E083 (10/03)

4. FEI Number 65-1034249	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

POSTERNAK, MIGUEL
 6509 LANDINGS COURT
 BOCA RATON, FL 33496

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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) DATE _____

Filing Fee is \$50.00 Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM POSTERNAK, MIGUEL 6509 LANDINGS CT. BOCA RATON, FL 33487
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM POSTERNAK, MARTIN CARR MEXICO-TOLUCA 1545 MEXICO CITY 05110,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM POSTERNAK, DANIEL CARR MEXICO-TOLUCA 1545 MEXICO CITY 05110,
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 04/27/05-80155-025 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  **MIGUEL POSTERNAK** Date: **4/25/05** Daytime Phone #: **561 994 7373**