## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # L46243

1. Entity Name JOYSA, INC.



FILED Apr 21, 2008 08:00 A Secretary of State

Fee Required

Principal Place of Business

8841 SW 20 ST 8841 SOUTHWEST 20TH ST. MIAMI, FL 33165 US

Mailing Address

8841 SW 20 ST 8841 SOUTHWEST 20TH ST. MIAMI, FL 33165 US



## DO NOT WRITE IN THIS SPACE

02202008 No Chg-P  4. FEI Number		CR2E034 (11/05)		
			. [	Applied For
59-2995			Not Applicable	
5. Certificate of	ificate of Status Desired		\$8.75	5 Additional

6. Name and Address of Current Registered Agent

MORAN, JOSE MANUEL

SIGNATURE:

## DO NOT WRITE

8841 S.W. 20TH ST. MIAMI, FL			,	IN THIS SPACE				
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.	Signature, typed or printed name of registered agent and title i	if applicable (NOTE Regi	stered Agent signature	required when reinstating)	DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution.   \$5.00 May Be Added to Fees		\$5.00 May Be Added to Fees	U00000910032 05/06/03-80092-022 150.00			
10.	OFFICERS AND DIREC	CTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORAN, JOSE MANUEL 8841 S W 20TH ST. MIAMI FL,							
TITLE NAME STREET ADDRESS CITY-ST-ZIP		·	.4					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN <sup>-</sup>	THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			,					
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
12. Thereby of indicated of the corchanged,	certify that the information supplied with this fil on this report or supplemental report is true a poration or the receiver or trustee empowered or on an attachment with an address, with all	ling does not qualify for the and accurate and that my sig to execute this report as re other like empowered.	exemptions con nature shall hav quired by Chapt	tained in Chapter 119 e the same legal effec er 607, Florida Statute	e), Florida Statutes. I further certify that the information of as if made under oath; that I am an officer or director is; and that my name appears in Block 10 or Block 11 if			

ED NAME OF SIGNING OFFICER OR DIRECTOR