

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 21, 2006 8:00 am
Secretary of State

03-21-2006 90043 042 ***150.00

DOCUMENT # L68589

1. Entity Name
JOECO HOLDINGS USA, INC.



Principal Place of Business
3107 STIRLING ROAD
SUITE 308
FT. LAUDERDALE, FL 33312 US

Mailing Address
3107 STIRLING ROAD
SUITE 308
FT. LAUDERDALE, FL 33312 US

DO NOT WRITE IN THIS SPACE



01042006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0196418

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FRIEDMAN, KENNETH A. ESQ
3107 STIRLING ROAD
SUITE 308
FT. LAUDERDALE, FL 33312

**DO NOT WRITE
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 if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DPST
MILLER, ALLAN
1912 SOUTH OCEAN DRIVE., APT 20A
HALLANDALE, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 all other like empowered.

SIGNATURE: *Allan Miller* **ALLAN MILLER**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARCH-07-2006

Date

514-592-2233

Daytime Phone #