FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

(3)

JOY N. INVESTMENT CORPORATION

FILED

Mar 25 1998 8:00am

Secretary of State

Principal Place	e of Business	Mailing Address							
884 EAST OAKLAND PARK BOULEVARD			884 EAST OAKLAND PARK BOULEVARD				D		
FORT LAUDERDALE FL 33334			FORT LAUDERDALE FL 33334					DO NOT INDITE IN THIS COACE	
US			U\$					DO NOT WRITE IN THIS SPACE	
								3. Date Incorporated or Qualified	
								02/11/1986	
2. Principal Place of Business			2a, Mailing Address					4. FEI Number Applied For	
21			26					59-2785868 Not Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired S8.75 Additional	
22			[27]					Fee Required	
City & State			City & State					6. Election Campaign Financing \$5.00 May Be	
23		Zip Country					Trust Fund Contribution Added to Fees		
Zip	 	untry	_ 					8. This corporation owes or has paid the current year Intangible	
24 25 29 30 9. Name and Address of Current Registered Agent					30	Personal Property Tax due June 30. Yes L No 10. Name and Address of New Registered Agent			
								10. Haille and Address of New Hegistered Agent	
NEILL, JACK JAMES						of Name			
884 EAST OAKLAND PARK BOULEVARD						82	Street	Address (P.O. Box Number is Not Acceptable)	
FORT LAUDERDALE FL 33334					Į				
						83			
						64	City	85 Zip Code	
							,	FL ` '	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
agent. I am ramiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE Signature, typed or profiled name of registered and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE									
12.		OFFICERS AND C			13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DVP			DELETE	1.1 T/3	ΓLΕ		☐ Change ☐ Addition	
NAME	NEILL, JACK J	AMES			1.2 NA	ME			
STREET ADDRESS		LAND PARK BOL	JLEVARD				ADDRESS	ļ	
CITY-ST-ZIP	FORT LAUDER				1.4 CI				
TITLE	DP			DELETE	2.1 717		1-217	Change Addition	
NAME	NEILL, JOY		_		2.2 NA				
STREET ADDRESS	884 EAST OAK				2.3 STREET ADDRESS				
	FORT LAUDER	JEC 17 W ID			-				
CITY-ST-ZIP TITLE	TOTAL ENDER	DALL IL		DELET E	2. 4 Cl		11-ZIP	☐ Change ☐ Addition	
1			ш	DEEC 16	3.1 M			- Vitaligo - Notition	
NAME PROCES ADDRESS							1000000		
STREET ADDRESS							ADDRESS		
CITY-ST-ZIP				DELETE	3.4 CI		i I - ZIP	Change Addition	
TITLE			لاا	DELETE	4.1 111			E Change L Adulton	
NAME					4. 2 N				
STREET ADDRESS							ADDRESS		
CITY-ST-ZIP				DELETE	4.4 00		T - ZIP	☐ Change ☐ Addition	
TITLE				DELETE	5.1 717			Change Addition	
NAME					5.2 NA]	
STREET ADDRESS					5.3 ST	REET.	ADDRESS		
CITY-ST-ZIP				-22-2-	5.4 CIT		T-ZIP		
TITLE				DELETÉ	6.1 TIT	LE		Change Addition	
NAME					6.2 NA	ME	į		
STREET ADDRESS					6.3 ST	REET	address		
CITY-ST-ZIP					6.4 CH				
14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119,07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.									

JOY NEILL