


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000036877		
1. Entity Name JOLI GROUP, INC.		
Principal Place of Business 2826 SW PORT ST LUCIE PORT SAINT LUCIE, FL 34953 US		Mailing Address 321 SE. CORK RD. PORT ST. LUCIE, FL 34984 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent RODRIGUEZ, JOSEPH 321 SE. CORK RD. PORT ST. LUCIE, FL 34984		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when retreating)</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RODRIGUEZ, JOSEPH 321 SE. CORK RD. PORT ST. LUCIE, FL 34984	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD RODRIGUEZ, LISA ANN 321 SE. CORK RD. PORT ST. LUCIE, FL 34984	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. 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 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: <u>Lisa Rodriguez</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<u>4/28/04</u> <small>Date</small> <u>772-344-408</u> <small>Daytime Phone #</small>



04282004 No Chg-P CR2E034 (10/03)

4. FEI Number 22-3785401	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

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04/30/04-80081-017 150.00

**DO NOT WRITE
IN THIS SPACE**