2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

DOCUMENT

P01000065247

1. Entity Name



FILED Jan 17, 2003 8:00 am Secretary of State

01-17-2003 90058 028 ***150.00

JOY'S FOOD, INC. Principal Place of Business Mailing Address 12306 UNV MALET 13080 NW 11TH ST STE 2 SUNRISE FL 33323 **TAMPA FL 33612** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 57-1125736 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CHI, TSUI O Street Address (P.O. Box Number is Not Acceptable) 13080 NW 11TH ST SUNRISE FL 33323 City Zip Code 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) FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Addition ☐ Change CHI. TSUI O NAME NAME 13080 NW 11TH ST STREET ADDRESS STREET ADDRESS SUNRISE FL 33323 CITY-ST-ZIP CITY-ST-ZIP DS TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME KENNEDY. CH NAME STREET ADDRESS 13080 NW 11 ST STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33323 CITY-ST-ZIP TITLE DT ☐ Defete TITLE Change ☐ Addition NAME ROY, E NAME STREET ADDRESS 13080 NW 11 STREET STREET ADDRESS

TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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)(i), 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

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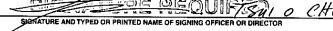
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FORT LAUDERDALE FL 33323

changed, or on an attachment with an address, with all other like empowered.



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