


FILED  
Aug 29, 2003 8:00 am  
Secretary of State

07-21-2003 90131 045 \*\*\*150.00

7/21

2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)

<b>DOCUMENT # P01000067533</b>			
1. Entity Name <b>KAY JOY FLOREST, INC.</b>			
Principal Place of Business <b>2340 PALM BEACH LANE BLVD 212 WEST PALM BEACH, FL 33409</b>		Mailing Address <b>3587 VILLAGE BLVD 301 WEST PALM BEACH, FL 33409</b>	
2. Principal Place of Business		3. Mailing Address	
State, Apt. #, etc.		State, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip Country	
4. Name and Address of Current Registered Agent <b>BURRELL, KAREN 3587 VILLAGE BLVD. APARTMENT 301 WEST PALM BEACH, FL 33409</b>		5. FRI Number <b>65-1119384</b>	
6. Certificate of Status Document <input type="checkbox"/> \$5.00 Additional Fee Required		7. State and Address of Prior Registered Agent	
8. The filer hereby certifies that the information furnished for the purpose of changing its registered office or registered agent, or both, in the State of Florida, is true and correct, and that the filer is the owner of the corporation.		9. Election Campaign Financing Total Political Contributions <input type="checkbox"/> \$5.00 May Be Added to Form	
SIGNATURE: <i>Karen Burrell</i> <b>Karen Burrell, President</b> 06/15/03			
10. OFFICERS AND DIRECTORS		11. ADDITIONAL REGISTRARS TO OFFICERS AND DIRECTORS IN FL	
NAME DATE CHIEF REGISTRAR CITY-STATE-ZIP	P BURRELL, KAREN 3587 VILLAGE BLVD APT 301 WEST PALM BEACH, FL 33409 <input type="checkbox"/> State	NAME DATE CHIEF REGISTRAR CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Address
NAME DATE CHIEF REGISTRAR CITY-STATE-ZIP	<input type="checkbox"/> State	NAME DATE CHIEF REGISTRAR CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Address
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NAME DATE CHIEF REGISTRAR CITY-STATE-ZIP	<input type="checkbox"/> State	NAME DATE CHIEF REGISTRAR CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Address
12. I hereby certify that the information supplied with this report does not qualify for the exemption offered in Section 190.01(2)(b), Florida Statutes. I further certify that the information furnished 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 having responsibility to execute this report as required by Chapter 687, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attached exhibit, with all other the organization.			
SIGNATURE: <i>Karen Burrell</i> <b>Karen Burrell, President</b> 06/15/03 561-686-676			

55055347

☐ CHECK HERE IF MAKING CHANGES

CHIEF REGISTRAR (1/03)

Attachment

55055349

To: Florida Department of state  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Fr: Karen Burrell  
3507 Village Blvd  
Apt #301  
West Palm Beach, Florida 33409

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Subject: Kay Joy Florist, Inc. payment of \$400 late fee

Reference Number: P01000067533

Please accept my apology for not filing the annual report/uniform business report before the due date. I did not receive a letter from your department and when I finally called to check on the annual/uniform business report, the due date already passed. I am asking you to please deduct the late fee from my account. I am the sole owner of my business, and I am unable to pay an extra \$400 because I am not making any money from my business and I have a lot of expenses both from the business and personally.

Incase you need to speak with me, I can be reached at 561-358-5396 or 561-686-6126.

I appreciate your patience

Sincerely,  
Karen Burrell, President  
*Karen Burrell*.....