

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000019043

FILED
Jun 04, 2004
Secretary of State

Entity Name: FATHER JOY, INC.

Current Principal Place of Business:

9372 NW 55 STREET
SUNRISE, FL 33351

New Principal Place of Business:

3244 NW 88TH AVE.
SUNRISE, FL 33351

Current Mailing Address:

9372 NW 55 STREET
SUNRISE, FL 33351

New Mailing Address:

3244 NW 88TH AVE.
SUNRISE, FL 33351

FEI Number: 75-2983236

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHUCK MOGBO, P.A.
2800 W OAKLAND PARK BLVD
SUITE 209
OAKLAND PARK, FL 33311 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FARQUAHARSON, MICHAEL W
Address: 9372 NW 55 STREET
City-St-Zip: SUNRISE, FL 33351

Title: VS () Delete
Name: FARQUAHARSON, JANET J
Address: 9372 NW 55 STREET
City-St-Zip: SUNRISE, FL 33351

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FARQUAHARSON, MICHAEL W
Address: 3244 NW 88TH AVE.
City-St-Zip: SUNRISE, FL 33351

Title: VS (X) Change () Addition
Name: FARQUAHARSON, JANET J
Address: 3244 NW 88TH AVE.
City-St-Zip: SUNRISE, FL 33351

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL W. FARQUAHARSON

P

06/04/2004

Electronic Signature of Signing Officer or Director

_____ Date