.2006 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P02000097165

1. Entity Name
JOELL DESIGNERS CORP.

Principal Place of Business	Mailing Address
1665-1667 WEST 31 PLACE HIALEAH, FL 33012	17114 SW 119 PL MIAMI, FL 33177

DO NOT WRITE IN THIS SPACE

01142006   No Chg-P   CR2E034 (11/05)

4. FEI Number		Applied For
06-1646563		Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ALFONSO, OSVALDO
17114 SW 119 PL
MIAMI, FL 33177

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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 **X** _____

Signature, typed or printed name of registered agent and title, if applicable.   (NOTE: Registered Agent signature required when reinstating)

DATE 1-15-06

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	ALFONSO, OSVALDO
STREET ADDRESS	17114 SW 119 PL
CITY-ST-ZIP	MIAMI, FL 33177

TITLE	
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CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #