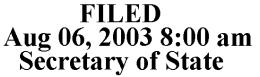
## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) P02000128429 **DOCUMENT #** 1. Entity Name JOYSONG, INC.



08-06-2003 90056 006 \*\*\*558.75

					WE TH						
Principal Place of Business 1487 SPRINGSIDE DR WESTON FL 33326		1487 \$	Mailing Address 1487 SPRINGSIDE DR WESTON FL 33326								
2. Principal P	lace of Business	3. Maili	3. Mailing Address						1)  2	1010   011   001	
Suite, Apt.	#, etc.	Suite	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES					
City & Stat	е	City 8	& State		4. FE! Nur 65-		FE! Number 79488	79488		Applied For Not Applicable	
Zíp	Country	Zip		Countr	У	5. (	Certificate of Status Desired		8.75 Ad se Require		
	6. Name and Address of Curre	nt Registered	d Agent	Τ.		7. N	Name and Address of New Register	ed Ag	ent		
					Name						
PENN, WILL											
				Street Addre			Box Number is Not Acceptable)				
1487 SPRINGSIDE DR					· · · · · · · · · · · · · · · · · · ·		<u> </u>				
WESTON FL 33326				.							
• :				Ė	City	•		ĒL	Zip Coo	le	
	named entity submits this statementions of registered agent.	t for the purpo	se of changing its	registered	d office or registe	ered age	ent, or both, in the State of Florida.		niliar with,	and accept	
SIGNATURE .											
	Signature, typed or printed name of registered ag	ent and title if appli	cable. (NOTE	E: Registered	Agent signature require	ed when re	einstating) DA	TE.			
After Se	ILE NOW!!! FEE IS \$550.00 otember 10, 2003 Fee will be \$7 or Payable to Florida Department						Election Campaign Financing     Trust Fund Contribution.			00 May Be d to Fees	
10.	OFFICERS AN		25	11.		۸۲	L DITIONS/CHANGES TO OFFICERS /	VID D	IDECTOR	S INI 11	
	PD	AD DINECTOR				AU	DITIONS/CHANGES TO OFFICERS		_		
TITLE	PENN, SHIRAH		☐ Delete	TITLE	İ			L	Change	☐ Addition	
NAME STREET ADDRESS	1487 SPRINGSIDE DR			NAME	T ADDRESS					Ì	
CITY-ST-ZIP	WESTON FL 33326			CITY-S	ſ						
					31-211						
TITLE	VD		☐ Delete		<u> </u>			. L	Change	☐ Addition	
NAME	PENN, WILL			NAME						ŀ	
STREET ADDRESS	1487 SPRINGSIDE DR				F ADDRESS						
CITY-ST-ZIP	WESTON FL 33326			CITY-S	51-212			_			
TITLE	STD		Delete	TITLE					Change	Addition	
NAME	JEFFRERSON, MERYL		· '	NAME						-	
STREET ADDRESS	1000 011 01 7112 11				T ADDRESS					}	
CITY-ST-ZIP	N LAUDERDALE FL 33068		<del></del>	CITY-S	51-ZIP			_			
TITLE			Delete	TITLE			<u> </u>		Change	Addition	
NAME				NAME			<u> </u>				
STREET ADDRESS					ADDRESS					1	
CITY-ST-ZIP			:	CITY-S	ST-ZIP			_			
TITLE			☐ Delete	TITLE					] Change	☐ Addition ☐	
NAME	·	-		NAME.	[						
STREET ADDRESS		.,	۸.	-	ADDRESS						
CITY - ST - ZIP				CITY-S	IT-ZIP						
TITLE		•	☐ Delete	TITLE					] Change	☐ Addition	
NAME				NAME			<b>&gt;</b> <del>-</del>				
STREET ADDRESS					ADDRESS		•			Ì	
CITY-ST-ZIP				CITY-S		~	3			\	
12. I hereby of indicated of the corchanged,	pertify that the information supplied won this report or supplemental reporporation or the receiver or trustee en or on an attachment with an addres	vith this filing of t is true and a npowered to e s, with all othe	does not qualify for ccurate and that m xecute this report a er like empowered.	the exem ny signatu as require	ption stated in Sire shall have the d by Chapter 60	ection 1 same le 7, Floric	119.07(3)(i), Florida Statutes. I further egal effect as if made under oath; tha da Statutes; and that my name appea	certify t Lam s in B	that the i an officer lock 10 or	nformation or director Block 11 if	

SIGNATURE: