## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000128948

Entity Name: JOYFUL GENIUS INC.

FILED Apr 24, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2428 SAN PIETRO CIRCLE 15896 DOUBLE EAGLE TRAIL PALM BEACH GARDENS, FL 33410 DELRAY BEACH, FL 33446

Current Mailing Address: New Mailing Address:

2428 SAN PIETRO CIRCLE 15896 DOUBLE EAGLE TRAIL PALM BEACH GARDENS, FL 33410 DELRAY BEACH, FL 33446

FEI Number: 65-1172566 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MIKE, JOHN MD
2428 SAN PIETRO CIRCLE
PALM BEACH GARDENS, FL 33410 US

MIKE, JOHN MD
15896 DOUBLE EAGLE TRAIL
DELRAY BEACH, FL 33446 US

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: 04/24/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 MIKE, JOHN M
 Name:
 MIKE, JOHN M

 Address:
 2428 SAN PIETRO CIRCLE
 Address:
 15896 DOUBLE EAGLE TRAIL

 City-St-Zip:
 PALM BEACH GARDENS, FL 33410
 City-St-Zip:
 DELRAY BEACH, FL 33446

Title: D () Delete Title: D (X) Change () Addition

Name: MIKE, SUSAN L Name: MIKE, SUSAN L

Address: 2428 SAN PIETRO CIRCLE Address: 15896 DOUBLE EAGLE TRAIL
City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip: DELRAY BEACH, FL 33446

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: JOHN M MIKE D 04/24/2007