

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000058264

FILED  
Jul 02, 2008  
Secretary of State

Entity Name: JOEL II, INC.

**Current Principal Place of Business:**

17395 FOX TRAIL LN  
LOXAHATCHEE, FL 33470

**New Principal Place of Business:**

11985 SOUTHERN BLVD  
113  
ROYAL PALM BEACH, FL 33411

**Current Mailing Address:**

11985 SOUTHERN BLVD  
113  
ROYAL PALM BEACH, FL 33411

**New Mailing Address:**

FEI Number: 42-1636253

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

JOHNSON, KOREEN  
17395 FOX TRAIL LN  
LOXAHATCHEE, FL 33470 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: D ( ) Delete  
Name: JOHNSON, KOREEN  
Address: 17395 FOX TRAIL LN  
City-St-Zip: LOXAHATCHEE, FL 33470

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: KOREEN JOHNSON

DIR

07/02/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date