

May 30,
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**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P04000010243			
1. Entity Name JOYELLE ENTERPRISES, INC.			
Principal Place of Business 2162 CLEMATIS STREET SARASOTA, FL 34239	Mailing Address 2162 CLEMATIS STREET SARASOTA, FL 34239		
DO NOT WRITE IN THIS SPACE			
		05152006 No Chg. P CR2E034 (11/05)	
		4. FEI Number 20-0583976	Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent LEITNER, MARY JOY 2162 CLEMATIS STREET SARASOTA, FL 34239		DO NOT WRITE IN THIS SPACE	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing.)</small> DATE _____			
FILE NOW!!! FEE IS \$150.00 Due by September 5, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		<div>U00000566246 05/30/06-80002-006 150.00</div> DO NOT WRITE IN THIS SPACE	
TITLE	P		
NAME	LEITNER, MARY JOY		
STREET ADDRESS	2162 CLEMATIS STREET		
CITY-STATE-ZIP	SARASOTA, FL 34239		
TITLE			
NAME			
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CITY-STATE-ZIP			
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TITLE			
NAME			
STREET ADDRESS			
CITY-STATE-ZIP			
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 employment.			
SIGNATURE: 		5/28/06 941 8873584	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	