

## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000041999

1. Entity Name JOAN CHAMBERS, INC.



**FILED** Apr 30, 2007 08:00 Al Secretary of State

Principal Place of Business

550 N.E. 61 ST. FORT LAUDERDALE, FL 33334 Mailing Address

550 N.E. 61 ST. FORT LAUDERDALE, FL 33334



01102007

No Cha-P

CR2E034 (11/05)

4. FEI Number 76-0752795 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

CHAMBERS, JOAN 550 N.E. 61 ST.

FORT LAUDERDALE, FL 33334

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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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

10.	OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CHAMBERS, JOAN 550 N.E. 61 ST. FORT LAUDERDALE, FL 33334
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TITLE NAME STREET ADDRESS CITY-ST-ZIP-	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

## DO NOT WRITE IN THIS SPACE

12. It 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: