

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 02, 2007 08:00 A
Secretary of State

DOCUMENT # P04000047607

1. Entity Name
JOLLY ENTERPRISES OF DUNDEE, INC



Principal Place of Business
302 E. MAIN ST
DUNDEE, FL 33838 US

Mailing Address
302 E. MAIN ST
DUNDEE, FL 33838 US



04252007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0876682	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

YASMIN, FOUJIA
302 E. MAIN ST
DUNDEE, FL 33838

**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 _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**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	P,D
NAME	YASMIN, FOUJIA
STREET ADDRESS	302 E. MAIN ST
CITY-ST-ZIP	DUNDEE, FL 33838

TITLE	M
NAME	NUR, NAZMUN
STREET ADDRESS	300 EDMUND AVE
CITY-ST-ZIP	DUNDEE, FL 33838

TITLE	M
NAME	ISLAN, ANN
STREET ADDRESS	300 EDMUND AVE
CITY-ST-ZIP	DUNDEE, FL 33838

TITLE	M
NAME	MANZUR, ALAN
STREET ADDRESS	300 EDMUND AVE
CITY-ST-ZIP	DUNDEE, FL 33838

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/23/07-80058-015-158.75

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IN THIS SPACE**

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 empowered.

SIGNATURE: Foujia Yasmin P.D
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #