

2007 FOR PROFIT CORPORATION ANNUAL REPORT

9/10/2007-90004-035-\$150.00-\$150.00

FILED

07 OCT 03 PM 1:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



08032007 Chg-P CR2E034 (12/08)

DOCUMENT # P04000146924			
1. Entity Name JOE MARTIN, INC.			
Principal Place of Business 2030 MARTIN RD. DOVER, FL 33527		Mailing Address 2030 MARTIN RD. DOVER, FL 33527	
2. Principal Place of Business - No P.O. Box # 2030 Martin Rd		3. Mailing Address SAB	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Dover FL		City & State	
Zip 33527	Country Hills	Zip ↓	Country
4. FEI Number 58-2684994		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HEMNESS, GERALD L JR. 205 NORTH PARSONS AVE. BRANDON, FL 33510		7. Name and Address of New Registered Agent Name: Joseph W. Martin Street Address (P.O. Box Number is Not Acceptable): 2030 Martin Road City: Dover FL Zip Code: 33527	
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: <i>Joseph W. Martin</i>		JOSEPH W MARTIN 8-25-07	
FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARTIN, JOSEPH W 2030 MARTIN RD. DOVER, FL 33527 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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: <i>Joseph W. Martin</i>		JOSEPH W MARTIN 8-25-07 813-918-9043	

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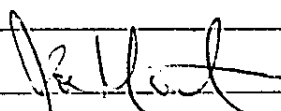
Attn: Tina Carter
Florida Dept of State

Please waive the 400.00 late fee as we never rec'd the original letter to file for the report. Once received, we did mail it in on time & received a letter from you all that the fee was waived, as well as the newly attached form. (I don't have the original waiver letter as I mailed it back to your office). So we filled out the form (attached) and then last week received this letter, advising the fee was now due. The form was returned.

Please honor the original notification we received that waives the fee so the report can be filed.

Thank you for your help, in advance.

Joe Martin Inc
Ref # P04000146924


813-918-9043 cell phn.