

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 30, 2006 8:00 am
Secretary of State

03-30-2006 90035 013 ***150.00

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1. Entity Name
JOE & LEN, INC.



Principal Place of Business
**29960 OVERSEAS HWY
BIG PINE KEY, FL 33043 US**

Mailing Address
**PO DRAWER 646
BIG PINE KEY, FL 33043**

20022964



02012006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0435780

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**VAN STRY, LEONARD A
29960 OVERSEAS HWY.
US HIGHWAY ONE
BIG PINE KEY, FL 33043**

**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, 2006 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
**VP
BESKIN, SCOTT
29168 PALM AVE 25415 DAN BROWN 4:11 Ad.
BIG PINE KEY, FL 33043 Brooksville, FL 34602**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**P
VAN STRY, LEONARD A
22836 PORT ROYAL LN
CUDJOE KEY, FL 33042**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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NAME
STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
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: *Leonard A Van Stry* **Leonard A VAN STRY**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/23/06

Date

305-822-2258

Daytime Phone #