

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

pg. 1 of 2

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 AUG -5 PM 3:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # *PA4000044886*
1. Corporation Name
JOACO IS INC.

Principal Place of Business Mailing Address
16851 N.W. 69th PLACE SAME
HALEAH, FL 33015

3. Date Incorporated or Qualified *02/09/95* 3a. Date of Last Report *02/96*

2. Principal Place of Business 21 <i>16851 N.W. 69th PLACE</i> Suite, Apt. #, etc. 22 City & State 23 <i>HALEAH</i> Zip 24 <i>33015</i>	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 25 <i>U.S.A.</i> 30	4. FEI Number <i>65-0582022</i> Applied For Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JOAQUIN GUERRERO
16851 N.W. 69th PLACE
HALEAH, FL 33015

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent's signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>PRESIDENT</i> <i>JOAQUIN GUERRERO</i> <i>16851 N.W. 69th PLACE</i> <i>HALEAH, FL 33015</i>	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <i>100002262471-1</i> <i>-08/08/97-01141-021</i> <i>***165.00 ***165.00</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: *Joquin Guerrero* 07/07/97 (305) 826-0716
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)

2012

JOACO'S, INC.
(305) 826-0716 FAX (305) 821-8457
16851 N.W. 69TH PLACE
HIALEAH, FL 33015

July 7, 1997

DIVISION OF CORPORATIONS
ANNUAL REPORTS SECTION
P.O. BOX 1500
TALLAHASSEE, FLORIDA 32302-1500

RE: JOACO'S INC. / FEI # 65-0582022
LOST APPLICATION AND CHECK IN THE MAIL.

Dear Sir:


I have contacted your office a couple of weeks ago to inform that as I was doing the bank reconciliation for June -97 I found that check # 1072 dated 04/27/97 was still outstanding. The officer checked and found out that the Annual Report application and the check has not been received by your office and that the best thing to do was request a new form and send a new check immediately.

Please find enclosed herewith a new application form and a new check for Joaco's Inc..

We will appreciate if you send to us a confirmation that everything is in order and that we will not have any penalties since this problem was out of our control.

We are sending all of these documents by certified mail to avoid any more inconveniences.

Yours sincerely,


Rosa Chamberlain
Accountant

Enc. ANNUAL REPORT APPLICATION FOR 1997
CHECK # 1098