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

PROFIT CORPORATION ANNUAL REPORT

1998



TLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000074848 (0)

JOEY'S WORLD, INC.

FILED May 12 1998 8:00am Secretary of State



					<u> </u>		E1001 1017 1007		
Principal Place	e of Business	Mailing Address	Mailing Address						
2460 S.W. 50TH STREET FORT LAUDERDALE FL 33312			2460 S.W. 50TH STREET FORT LAUDERDALE FL 33312			DO NOT WRITE IN THIS	SPACE		
						3. Date Incorporated or Qualified 10/10/1994	017102		
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number		Applied For	
21		26	26			65-0543875			
Sulte, Apt.	#, etc.	Suite, Apt #, etc.	· · · · · · · · · · · · · · · · · · ·			5. Certificate of Status Desired	\$8.75 Additional Fee Regulred		
City & State	9	City & State	City & State			6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution	Adde	d to Fees	
Zip	Country	Ζιρ	 	intry		8. This corporation owes or has paid the cu			
24	25	29	30	·			Yes	∐ No	
	9. Name and Address of Cui	rrent Registered Agent		01	Name	10. Name and Address of New Registered	Agent		
PANGONE, JOSEPH C					Name				
2460 S.W. 50TH STREET					Street Address (P.O. Box Number is Not Acceptable)				
F0	RT LAUDERDALE FL 33312								
				83					
			•	84	City		85 Zi	ip Code	
					<u> </u>	poration submits this statement for the purpose of			
agent. I a SIGNATURE	m familiar with, and accept the of Signature types or possessing disciples OF FICERS					DATE ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	_			1.1 TITLE			Chang	e 🔲 Addition	
NAME	PANCIONE, JOSEPH C		1.2 N	AME					
STREET ADDRESS	2460 S.W. 50TH STREET		1.3 \$	TREET	ADDRESS				
CITY-ST-ZIP	FORT LAUDERDALE FL 33	3312	1.4 C	ITY-S	ST - 7IP				
TITLE		DELETE	2.1 TI	TLE			Chang	e Addition	
NAME			2.2 N	AME					
STREET ADDRESS			2.3 S	TREET	ADDRESS				
CITY-ST-ZIP			2.40	HY-	ST-ZIP				
TITLE		DELETE	3 1 T(TLE			☐ Chang	e Addition	
NAME			3.2 N	AME	1				
STREET ADDRESS			3.3 S	TREE1	I ADDRESS				
CITY-ST-ZIP			3.4. (HY-S	ST-ZIP				
TITLE		DELETE	417	TLE			Chang	e 🔲 Addition	
NAME			4 2 1	IAME					
STREET ADDRESS			4 3 S	TREFI	ADDRESS				
CITY-ST-ZIP			440	ήY-5	ST - 7 IP				
TITLE		DELETE	511	HLE			Chang	ge L Addition	
NAME			5.2 N	AME					
STREET ADORESS			5.3 S	1REF1	I ADDRESS				
CITY-ST-Z#P				1TY - 5	ST-ZIP				
TITLE		DELETE	61 T	ITLF			☐ Chang	ge 🔲 Addition	
NAME			62N	AME					
STREET ADDRESS			6.3 \$	TREET	T ADDRESS				
CITY-ST-ZIP			6.4 0	:กץ-5	ST-ZIP				
14 Lherens	cortify that the information sumplie	od with this filma does not qual				n Section 119.07(3)(i), Florida Statutes. I further of	ertify that	the information	

4. I hereby certify that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 pri an attachment with an address.

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