

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000021155 (3)

1. Corporation Name

JOELOU, INC.



Principal Place of Business

5524 W. OAKLAND PARK BLVD.
LAUDERHILL FL 33313

Mailing Address

5524 W. OAKLAND PARK BLVD.
LAUDERHILL FL 33313

3. Date Incorporated or Qualified

03/15/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FILINGS, INC.

3732 N.W. 16TH STREET
FORT LAUDERDALE FL 33311

81

Name

Joseph Tribunella

82

Street Address (P.O. Box Number is Not Acceptable)

5524 W. OAKLAND PK Blvd

83

84

City

Lauderhill

FL

85

Zip Code

33313

11. Pursuant to the provisions of Sections 607.06(2) and 607.1506, 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 607.0605, Florida Statutes.

SIGNATURE

Signature based on previous record of registered agent in this jurisdiction

Signature of Registered Agent is not required when recording

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME

D
TRIBUNELLA, JOSEPH
5524 W. OAKLAND PARK BLVD.
LAUDERHILL FL 33313

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

D
TRIBUNELLA, LOUIS
5524 W. OAKLAND PARK BLVD.
LAUDERHILL FL 33313

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

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CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13.

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY - ST - ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY - ST - ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY - ST - ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY - ST - ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY - ST - ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY - ST - ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY - ST - ZIP

29. TITLE

30. NAME

31. STREET ADDRESS

32. CITY - ST - ZIP

33. TITLE

34. NAME

35. STREET ADDRESS

36. CITY - ST - ZIP

37. TITLE

38. NAME

39. STREET ADDRESS

40. CITY - ST - ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 registrar 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Corporate File Number

CR2E034 (12/95)