

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

PROFIT
CORPORATION
ANNUAL REPORT
2000



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 15, 2000 8:00 am
Secretary of State

05-15-2000 90189 025 ***158.75

DOCUMENT # **P96000013841**

1. Corporation Name

JOSEPH'S LANDING, INC.

Principal Place of Business

Mailing Address

**2460 W. CYPRESS CREEK RD.
FORT LAUDERDALE, FL 33309**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

2-1-96

4. FEI Number

65-0646521

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WILLIAM REILLY
396 BROADWAY #1001
NEW YORK, NEW YORK 10013**

81 Name **WILLIAM J. REILLY**

82 Street Address (P.O. Box Number is Not Acceptable)
5447 NW 42 AVE

83

84 City **BOCA RATON**

FL

85 Zip Code
33496

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 **William J. Reilly**

Secretary

3-2-00

DATE

Signatures, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **SECRETARY, DIRECTOR** ☐ DELETE
NAME **WILLIAM REILLY**
STREET ADDRESS **396 BROADWAY #1001**
CITY-ST-ZIP **NEW YORK, NEW YORK 10013**

1.1 TITLE **DIRECTOR** ☐ Change ☒ Addition
1.2 NAME **GARY QUIGLEY**
1.3 STREET ADDRESS **396 BROADWAY, SUITE 1001**
1.4 CITY-ST-ZIP **NEW YORK NY 10013**

TITLE **PRESIDENT, DIRECTOR** ☐ DELETE
NAME **KAY DURST**
STREET ADDRESS **2460 W. CYPRESS CREEK RD.**
CITY-ST-ZIP **FT. LAUDERDALE, FL 33309**

2.1 TITLE ☐ Change ☒ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE **DIRECTOR** ☐ DELETE
NAME **GARY QUIGLEY**
STREET ADDRESS **396 BROADWAY #1001**
CITY-ST-ZIP **NEW YORK NEW YORK 10013**

3.1 TITLE ☐ Change ☒ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE **PRESIDENT, DIRECTOR** ☒ DELETE
NAME **ROBERT BALLARD**
STREET ADDRESS **P.O. Box 4410**
CITY-ST-ZIP **FT. LAUDERDALE, FL 33338**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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, with all other like empowered.

SIGNATURE **William J. Reilly**

Secretary

3-2-00

212-683-1570

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #