

FROM :

FRM. NO. :

FILED
May 04, 2005 8:00 am
Secretary of State

05-04-2005 90116 012 ***150.00

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P96000058382

1. Entity Name
JOEL AND GINA, INC.



40080689

Principal Place of Business
13816 SW 8TH ST
MIAMI, FL 33184 US

Mailing Address
13816 SW 8TH STREET
MIAMI, FL 33184 US



04222005 No Chg-F CR2EC34 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-0679907 (Applied For / Not Applicable)

5. Purchase of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PEREZ, JOEL
1383 S.W. 143 AVENUE
MIAMI, FL 33184

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this report 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 _____ DATE _____
SIGNATURE SPECIFIC TO THIS FORM AND NOT TO BE REUSED FOR OTHER PURPOSES. NOTE: Registered Agent Signature Required for Filing.

FILE NOW!!! FEE IS \$150.00
AFTER May 1, 2005 Fee will be \$650.00

9. Election Campaign Financing
Trust Fund Contribution \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DR
NAME	PEREZ JOEL
STREET ADDRESS	1383 S.W. 143RD AVENUE
CITY-STATE-ZIP	MIAMI, FL 33184
TITLE	VP
NAME	PEREZ GINA
STREET ADDRESS	1383 S.W. 143RD AVENUE
CITY-STATE-ZIP	MIAMI, FL 33184
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I declare, as the person who has the authority to sign this report, that the information provided is true and accurate, and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the manager or trustee in charge of the corporation as required by Chapter 807, Florida Statutes, and that my name appears in Block 10 or Block 11 of this report. I am not a resident of the State of Florida.

SIGNATURE: *Joel Perez* 4/29/05 305 485 0052
SIGNATURE AND PRINTED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR