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## 2005 FOR PROFIT CORPORATION \_\_\_ ANNUAL REPORT

## Filed Feb 17, 2005 08:00 AM Secretary of State

1. Entity Nam JOUAUL	T'S CREPE MACHINE, INC.	Mailing Address 2198 NW 21 ST MIAMI, FL 33142		Secretary of State
E	OO NOT WRITE I		CE	01062005 No Chg-P CR2E034 (10/03)  4. FEI Number 65-0775211 Not Applied For Not Applicable  5. Certificate of Status Desired □ \$8.75 Additional Fee Required
	6. Name and Address of Current Region JOUAULT 21 STREET . 33142	stered Agent		DO NOT WRITE IN THIS SPACE
	named entity submits this statement for the tions of registered agent.  Signature, typed or prifted name of registered agent and file.	<u></u>	ed office or register	red agent, or both, in the State of Florida. I am familiar with, and accept
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Added to Fees				
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRE PD JOUAULT, CHRISTIAN R 2198 NW 21 STREET MIAMI, FL 33142	CTORS -		U00000232988 02/17/05-80024-025 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		<u> </u>		—DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		P 3 3		
indicated of the cor changed,	on this report or supplemental report is true rporation or the receiver or trustee empowers , or on an attachment with an address, with a	and accurate and that my signat	ura shall hava tha s	action 119.07(3)(i), Florida Statutes. I further certify that the information same legal effect as if made under cath; that I am an officer or director 7, Florida Statutes; and that my name appears in Block 10 or Block 11 if
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date:  Date:				