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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000012125 1. Corporation Name

Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90028 035 ***150.00

Joe's H	ANDY BOY, INC.					
Principal Place	of Business	Mailing Address			† 11 810 12 00 1 11010 Ji	MAY BUILDING
•		2935 NW 206TH ST				
2935 NW 206TH ST 2935 NW 206TH ST						
				. DO NOT WRITE IN THIS	S SPACE	
				3. Date Incorporated or Qualifed		
				02/05/1998		lied For
— ·	ace of Business	2a. Mailing Address		4. FEI Number (-65-0832196-09)	_ 	Applicable _
21 Suito Ant	26 Suite, Apt. #, etc. Suite, Apt. #, etc.			7_	\$8.75 Ad	
—				5. Certifcate of Status Desired , '	Fee Req	
City & State	p	City & State		6. Election Campaign Financing	\$5.00 M	Jav Be
23		28		Trust Fund Contribution	Added to	
Zip	Country	Zip	Country	8. This corporation owes the current year Ir	ntangible	
24	25	29 3	0	Personal Property Tax.		□No
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Registered	I Agent	
	V = EDIED DDOCESSIONIAL AS	OCCUTION .	81 Name	DSEPH & STATING	4	
	K E. FRIED PROFESSIOINAL AS	SOCIATION	82 Street Addr	ress (P.O. Box Number is Not Acceptable)		
1110 BRICKELL AVE, SUITE 700						
MIAMI FL 33131			83 293	35 NW 2069.		
			84 City		85 Zip Co	ode ~
			0	PALOCKA FI		os b
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	SOSEPHE STAR	, ,	egistered Agent signature require	d when reinstating) DATE	<u></u>	
12.	Signature, typed or printed name of registered age	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	RS IN 12
TITLE	D DWHEN	DELETE	1.1 TITLE		Change	Addition
NAME	STARLING, JOSEPH		1.2 NAME			
STREET ADDRESS	2935 NW 206TH ST		1,3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33056		1.4 CITY-ST-ZIP			
TITLE	Ma will L Good	☐ DELETE	2.1 TITLE		☐ Change	☐ Addition
NAME			2.2 NAME			ľ
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP	-		2. 4 CITY-ST-ZIP	<u> </u>		
TITLE		☐ DELETE	3.1 TITLE		Change	Addition
NAME			3.2 NAME			}
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TTILE		Change	☐ Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP		Change	Addition
TITLE		☐ DELETE	5.1 TITLE		Change	☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS 5.4 CITY-ST-ZIP			(
CITY-ST-ZIP		DELETE	6.1 TITLE		Change	Addition
TITLE			6.2 NAME		change	
NAME			6.3 STREET ADDRESS			
STREET ADDRESS	1		5.5 5.1. EE 100/1E00			i

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.

Daytime Phone #