



2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 20, 2005 8:00 am
Secretary of State

04-20-2005 90319 025 ***150.00

DOCUMENT # P98000055663 1. Entity Name JOYCOL, INC.			
Principal Place of Business 3085 JUPITER BLVD., SE #9 PALM BAY FL 32909		Mailing Address 1554 NONA STREET NE PALM BAY FL 32907	
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip 		3. Mailing Address 1601 MORLEY ST. S.E. Suite, Apt. #, etc. City & State PALM BAY, FLORIDA Zip 32909 Country U.S.A.	
		 1st MOORE CR2E034 (10/04)	
		4. FEI Number 59-3555177	
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent O'MEALLY, COLIN 1554 NONA STREET NE PALM BAY FL 32907		7. Name and Address of New Registered Agent Name O'Meally, Colin Street Address 1601 MORLEY STREET S.E. City PALM BAY FL Zip Code 32909	
8. The above named entity submits this statement 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 <i>Colin O'Meally, President</i> (change of address only) 04/14/05 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	DPT <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition address change only 1601 Morley Street, S.E. PALM BAY FL 32909
NAME	O'MEALLY, COLIN	NAME	
STREET ADDRESS	1554 NONA STREET NE	STREET ADDRESS	
CITY-ST-ZIP	PALM BAY FL 32907	CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition address change only 1601 Morley Street, S.E. PALM BAY, FL 32909
NAME	O'MEALLY, JOYCE	NAME	
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CITY-ST-ZIP	PALM BAY FL 32907	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
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NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
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NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
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NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>Colin O'Meally, President</i>		SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Colin O'Meally, President 04/14/05 321 674 2232	