2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V50439

FILED Mar 07, 2004 Secretary of State

Entity Na	me: JOAN'S	GALLEY TOO, INC.		
Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
20400 OLI MIAMI, FL	D CUTLER RC 33189	PAD		
Current N	lailing Addre	ss:	New Mailing Addres	ss:
20400 OLI MIAMI, FL	D CUTLER RC 33189)AD		
FEI Number	: 65-0346885	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)
Name and	d Address of (Current Registered Agent:	Name and Address	of New Registered Agent:
	N, KATHY			
20400 OLI MIAMI, FL	D'CUTLER RC 33189 US)AD		
MIAMI, FL The above	33189 US		ourpose of changing its registere	ed office or registered agent, or both,
MIAMI, FL The above n the Stat	33189 US e named entity e of Florida.		ourpose of changing its registere	ed office or registered agent, or both,
MIAMI, FL The above n the Stat	33189 US e named entity e of Florida. RE:			ed office or registered agent, or both, Date
MIAMI, FL The above n the Stat SIGNATU	33189 US e named entity e of Florida. RE: Electror	submits this statement for the բ		
MIAMI, FL The above In the Stat SIGNATU Election Ca	33189 US e named entity e of Florida. RE: Electror	submits this statement for the particles of Registered Age of Trust Fund Contribution ().	ent	
MIAMI, FL The above n the Stat SIGNATU Election Ca	and an	submits this statement for the particles of Registered Agrage Trust Fund Contribution (). ETORS:) Delete ATHY	ent	Date
MIAMI, FL The above In the Stat BIGNATU Election Ca DFFICER Fitle: Name: Address:	anamed entity e of Florida. RE: Electrol mpaign Financin S AND DIREC PT (MCMILLAN, KA 20320 BELAIR MIAMI, FL	submits this statement for the partic Signature of Registered Age g Trust Fund Contribution (). CTORS:) Delete NTHY E DR.) Delete	ADDITIONS/CHANG Title: Name: Address:	Date BES TO OFFICERS AND DIRECTORS

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATHY MCMILLAN PT 03/07/2004