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FILED
May 02, 2008 08:00 AM
Secretary of State

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # V65565		
1. Entity Name J & L'S WICKER STORE, INC.		
Principal Place of Business 3351 N FEDERAL HWY DELRAY BEACH, FL 33483 US		Mailing Address 3351 N FEDERAL HWY DELRAY BEACH, FL 33483 US
DO NOT WRITE IN THIS SPACE		
		
04292008 No Chg-P CR2E034 (11/05)		
4. FEI Number 65-0362311		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent ACOSTA, GERARDO 4807 NORTH LEE RD DELRAY BEACH, FL 33445		DO NOT WRITE IN THIS SPACE
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: _____ Signature, typed or printed name of registered agent and state if applicable. (NOTE: Registered Agent signature required when reinstating) DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE	DPST	DO NOT WRITE IN THIS SPACE
NAME	ACOSTA, GERARDO	
STREET ADDRESS	3351 N FEDERAL HWY	
CITY-ST-ZIP	DELRAY BEACH, FL 33483	
TITLE	DV	
NAME	ACOSTA, LINDA	
STREET ADDRESS	3351 N FEDERAL HWY	
CITY-ST-ZIP	DELRAY BEACH, FL 33483	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u>Gerardo Acosta</u> - President 4/27/08 561-732-4389		
_____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Gerardo Acosta - President		

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