

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N97000006977

FILED
May 01, 2003
Secretary of State

Entity Name: JANUS FOUNDATION USA, INC.

Current Principal Place of Business:

100 N. BISCAYNE BLVD.
21ST FLOOR
MIAMI, FL 331322306

New Principal Place of Business:

700 N. OLIVE AVE.
WEST PALM BEACH, FL 33431

Current Mailing Address:

100 N. BISCAYNE BLVD.
21ST FLOOR
MIAMI, FL 331322306

New Mailing Address:

700 N. OLIVE AVE.
WEST PALM BEACH, FL 33431

FEI Number: 35-1475376

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUINA, MARGARITA P.P.A.
100 N. BISCAYNE BLVD.
21ST FLOOR
MIAMI, FL 331322306

Name and Address of New Registered Agent:

MUINA, MARGARITA P
700 N. OLIVE AVE.
WEST PALM BEACH, FL 33431

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.

SIGNATURE: MARGARITA P. MUINA

05/01/2003

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: QUEBECK, THOMAS
Address: 100 N. BISCAYNE BLVD., 21ST FLOOR
City-St-Zip: MIAMI, FL 331322306

Title: D () Delete
Name: WOLLENSAK, GABRIELE
Address: 100 N. BISCAYNE BLVD., 21ST FLOOR
City-St-Zip: MIAMI, FL 331322306

Title: D () Delete
Name: ROSENTHAL, HELMUT
Address: 100 N. BISCAYNE BLVD., 21ST FLOOR
City-St-Zip: MIAMI, FL 331322306

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: QUEBECK, THOMAS
Address: 700 N. OLIVE AVE.
City-St-Zip: WEST PALM BEACH, FL 33431

Title: D (X) Change () Addition
Name: WOLLENSAK, GABRIELE
Address: 700 N. OLIVE AVE.
City-St-Zip: WEST PALM BEACH, FL 33431

Title: D (X) Change () Addition
Name: MUELLER, EVA
Address: 700 N. OLIVE AVE.
City-St-Zip: WEST PALM BEACH, FL 33431

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARGARITA P. MUINA AS ATTORNEY-IN-FACT.-

D

05/01/2003

Electronic Signature of Signing Officer or Director

Date