

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sarah B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

DOCUMENT # **P31293** (4)

95 MAY -1 PM 2:35

V.R. JANOWICH & CO., INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business: 2800 NE 14TH ST #126 POMPANO BCH FL 33062
Mailing Address: 2800 NE 14TH ST #126 POMPANO BCH FL 33062

2. Principal Nature of Business: 21
2a. Mailing Address: 26
22 State Apt. #, etc.: 27
23 City & State: 28
24 City: 25 State: 29 Zip: 30

3. Date incorporated or organized: 10/10/1990
3a. Date of Last Report: 04/29/1994
4. FL Number: 34-1322647 Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
7. This corporation has liability for intangible tax under s. 199 (317), Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
JANOWICH, VINCENT R
2800 NE 14TH ST
#126
POMPANO BCH FL 33062

10. Name and Address of New Registered Agent
81 Name:
82 Street Address (P.O. Box Number if Not Applicable):
83
84 City: FL 85 Zip Code:

11. Pursuant to the provisions of Sections 607.0507 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. Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: _____ (Signature of Registered Agent) _____ (Signature of Agent for Filing State Secretary)

12. OFFICERS AND DIRECTORS

TITLE	PST
NAME	JANOWICH, VINCENT R.
STREET ADDRESS	2800 NE 14TH ST, 126
CITY, ST, ZIP	POMPANO BCH FL
TITLE	VD
NAME	JANOWICH, VINCENT R.
STREET ADDRESS	2800 NE 14TH ST, 126
CITY, ST, ZIP	POMPANO BCH FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12:

11. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. NAME	
13. STREET ADDRESS	
14. CITY, ST, ZIP	
15. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
16. NAME	
17. STREET ADDRESS	
18. CITY, ST, ZIP	
19. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
20. NAME	
21. STREET ADDRESS	
22. CITY, ST, ZIP	
23. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
24. NAME	
25. STREET ADDRESS	
26. CITY, ST, ZIP	
27. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
28. NAME	
29. STREET ADDRESS	
30. CITY, ST, ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and is true and correct for the corporation stated on Form 1990/Chapter, Florida Statutes. I further certify that the information included 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 in person. That I am an officer or director of this corporation or the receiver or liquidator appointed to conduct 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.

SIGNATURE: *Vincent R. Janowich* VINCENT R. JANOWICH *Perfs* 305-796 0725
SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
4/30/95
8104648 CP