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PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000053303 (2)

JANEIRO INC.

| Principal Place of Business | | Mailing Address | | n indriente den 18600 vijat andete anste antifi | ORIDI BILON ILION LIVIN MBILON ILIJI IDDI |
|-------------------------------|---|--|---|---|--|
| 191 BRADLEY F PALM BEACH F | | 191 BRADLEY PL PALM BEACH FL 33480- | 3786 | | |
| | | | | 3. Date Incorporated or Qualified 07/30/1993 | 3a. Date of Last Report 04/01/1996 |
| | ace of Business | 2a. Mailing Address | | 4. FEI Number | Applied For |
| 21 | er ak in a karakanan an ar | 26 | | 65-0423642 | Not Applicable |
| Suite, Apt 4 | MANAY A. J. M. J. A. J. M. MANAY A. J. M. | Suite, Apt. #, etc. 27 City & State | ······································ | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| City & State | , | | | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be |
| 23 Zip | Country | 28 Zip | Country | 8. This corporation has liability for in | |
| 24 | 25 | 29 | 30 | | Yes No |
| <u> </u> | 9. Name and Address of Currer | | | 10. Name and Address of New Rec | |
| VOLUME TIOMS II | | | | | 1 |
| 241 BRADLEY PL | | | | UCHAIL THOMAS M dress (P.O. Box Number is Not Acceptable | / a\ |
| STE | | | 1 31101/9 | T BRADLEY PL | - |
| | M BCH FL 33480 | | 83 | | |
| | | | 84 City O | | Jar I Zin Codo |
| | | | PA | M BLACH | FL |
| 11. Pursuant t | o the provisions of Sections 607 050 | 02 and 607 1508, Florida Stati | utes, the above-named co | rporation submits this statement for the pr | urpose of changing its registered |
| agent. Lar | n familiar with, and accept the oblig | ations of, Section 607.0505, I | s authorized by the corpor Florida Statutes. | ation's board of directors. I hereby accep | tine appointment as registered |
| SIGNATURE | | | | | |
| | Stop afure, typed or printed name of registered ag | | OTE Registered Agent signature req | | DATE |
| 12. | | ID DIRECTORS | 13. | ADDITIONS/CHANGES TO OFFICE | |
| TITLE | D VOLICITAL THOMAS M | ☐ DELETE | 1 1 TITLE | | Change Addition |
| NAME | YOUCHAK, THOMAS M | | 1.2 NAME | | |
| STREET ADDRESS | 191 BRADLEY PLACE | | 1.3 STREET ADDRESS | | |
| CITY - ST - ZIP | PALM BCH FL VP | DELETE | 1.4 CITY- ST-ZIP | | Change Addition |
| TITLE NAME | YOUCHAK, MICHAEL T | L. Octob | 2 1 TITLE 22 NAME | | C change C Audition |
| STREET ADDRESS | 932 W. NORTH AV. | | 23 STREET ADDRESS | | |
| CITY ST-ZIP | PITTSBURGH PA | | 2.4 CITY-ST-ZIP | | |
| TITLE | | DELETE | 3 1 TITLE | | Change Addition |
| NAME | | | 3.2 NAME | | _ |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | |
| CITY - S1 - ZIP | | | 3.4. CITY-ST-ZIP | | |
| TITLE | | DELETE | 4.1 TITLE | | Change Addition |
| NAME | | | 4. 2 NAME | • | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | |
| CITY - S1 - ZIP | | | 4.4 CITY-ST-ZIP | | |
| TITLE | | DELETE | 5 1 TITLE | | Change Addition |
| NAME | | | 5.2 NAME | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | VB 2-1 |
| CITY - S1 - ZIP | | DEL EST | 5.4 CITY~ST~ZIP | | |
| TITLE | | L_ DEL€TE | 6.1 TITLE | 30000208 -02/11/970104 | Addition Addition |
| NAME | | | 6.2 NAME | -02/11/9/0104 | U48 |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | ***165 . 00 | |
| CITY+ST-ZIP | ny certify that the information country | ad with this filing does not our | 6.4 CITY-ST-ZIP | in Section 119.07(3)(i), Florida Statutes | s I further certify that the |
| information I am an of | in indicated on this annual report or ficer or director of the call peration on a Block 12 or Block to changed, | supplemental annual report is the receiver or trustee infor- on an attacher an in- | strue and accurate and accurate into rep | at my signature shall have the same legal ort as required by Chapter 607, Florida Si | effect as if made under oath; that tatutes; and that my name |

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED

Feb 07 1997 8:00am

Secretary of State