

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

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000077073 (3)

1. Corporation Name
JANNIFER'S SECRET, INC.



Principal Place of Business: 7600 DR PHILLIPS BLVD SUITE 2-121 ORLANDO FL 32819 US
Mailing Address: 7600 DR PHILLIPS BLVD SUITE 2-121 ORLANDO FL 32819 US

3. Date incorporated or Qualified: 11/08/1993
3a. Date of Last Report: 02/07/1995
4. FEI Number: 59-3208983
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21 Same as above
2a. Mailing Address: 26 Same as above
22. Suite, Apt. #, etc.: 27 Same as above
23. City & State: 28 Same as above
24. Zip: 25 Same as above
29. Country: 30 Same as above

9. Name and Address of Current Registered Agent: THE LAW FIRM LAWRENCE J SPIEGEL, CHARTERED 343 ALMERIA AVE CORAL GABLES FL 33134
10. Name and Address of New Registered Agent: 81 Name, 82 Street Address, 83, 84 City, 85 Zip Code (FL)

11. Pursuant to the provisions of Sections 607.0502 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Same DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D SEATON, JANNIFER	1.1 TITLE	Same
NAME	7600 DR. PHILLIPS BLVD STE. 2-121	1.2 NAME	Same
STREET ADDRESS	ORLANDO FL	1.3 STREET ADDRESS	7600 DR. Phillips Blvd. Suite 2-121
CITY-ST-ZIP		1.4 CITY-ST-ZIP	Same
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jannifer Seaton DATE: April 12, 1996 407-399-6007

CR2E034 (12/95)