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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Kathérine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000095472

. JANSON	INVEST, INC.							
Principal Place	of Business	Mailing Address),,,, 20 ,,,, 20 ,,, , ,	6:0: 6:111 E161: 11	•
333 17TH ST., STE. V VERO BEACH FL 32960 VERO BEACH FL 32960					OD NOT WRI	TE IN THIS	SPACE	
					3. Date Incorporated or Qualifed 11/06/1997			
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number 65-0795126	7117	} ```	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		\$8.75 A	
City & State					Election Campaign Financing Trust Fund Contribution		\$5.00 h Added to	
Zip	. Country	Zip Cou		/	This corporation owes the curr Personal Property Tax.	ent year Inta		□No
24	9. Name and Address of Current	11	·		10. Name and Address of New F	Registered /	gent	
MCHUGH, JOHN J JR 333 17TH ST., STE. U VERO BEACH FL 32960				Name Street A	ddress (P.O. Box Number is Not Accepta	able)	11-0	
				City		FL	85 Zip C	
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	ot Florida. Such change was auth	ionzea by	r ine corpoi	orporation submits this statement for the ation's board of directors. I hereby accept	purpose of optithe project	changing its r itment as reg	registered pistered
SIGNATURE		(NOTE: De	nictored Age	unt elanature rec	uired when reinstating)	DATE	سِـــ	
12.	Signature, typed or printed name of registered agen OFFICERS AN		13.	nii signature rec	ADDITIONS/CHANGES TO OF		D DIRECTO	RS IN 12
TITLE	D DELETE		1,1 TITLE				Change	☐ Addition
NAME	JANSON, SOREN		1.2 NAME					ĺ
STREET ADDRESS	333 17TH ST., STE. V		1.3 STREE	TADDRESS				
CITY-ST-ZIP	VERO BEACH FL 32960	_	1.4 CITY-5	ST-ZIP				
TITLE	D DELETE		2.1 TITLE				☐ Change	☐ Addition
NAME	MCHUGH, JOHN J JR		2.2 NAME					
STREET ADDRESS			2.3 STREE	TADDRESS	•			
CITY-ST-ZIP	72110 021011		2. 4 CITY-	ST-ZIP				Addition
TITLE		☐ DELETE	3.1 TITLE				Change	☐ Wildings
NAME			3.2 NAME					
STREET ADDRESS				T ADDRESS				ļ
CITY-ST-ZIP		☐ DELETE	3.4. CITY- 4.1 TITLE	ST-ZIP			☐ Change	Addition
TITLE			# 4.1 JIILE					

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplier ental 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 driving a transfer of the corporation of 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 driving a transfer of the corporation of the receiver or trustee empowered.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

DELETE

DELETE

☐ Change

☐ Change

Addition

☐ Addition