FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 333371

(3)

Mailing Address

14411 S DIXIE HWY

JANIS AND KING, INC.

Principal Place of Business

14411 S DIXIE HWY

1998

FILED
Jan 29 1998 8:00am
Secretary of State



SUITE 206 Miami FL 33	176	SUITE 206 MIAMI FL 33176				DO NOT WRITE IN THIS SPACE			
US	176	US				3. Date Incorporated or Qualified			
•						08/05/1968			
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	Applied	d For	
21	26					59-2430308	- 	plicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.						_	\$8.75 Addit	lonal	
22		27				5. Certificate of Status Desired	Fee Requir	ed	
City & Stat	9	City & State				6. Election Campaign Financing	\$5.00 May	/ Be	
23	28					Trust Fund Contribution	Added to Fe		
Zip	Country	Zip	Countr			8. This corporation owes or has paid the curre	it year Intangi	ble	
24	25	29	30			Personal Property Tax due June 30.)	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent									
KING, WILLIAM P				81	Name				
14411 S DIXIE HWY				82 Street Address (P.O. Box Number is Not Acceptable)					
SUITE 206				at Street Address (1.0. Box Northber is Not Acceptable)					
MIAMI FL 33176				83					
	5 = 55 00 5			84	City		nel Zin Code		
				**	City	FL i	85 Zip Code	,	
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	Signature, typed or printed name of registered agent	and title if applicable (NOTE	Registere	d Age	nt signature require	red when reinstating) DATE			
12.	OFFICERS AND DIRECTORS			13.		ADDITIONS/CHANGES TO OFFICERS AND D	RECTORS IN	12	
TITLE	\$D DELETE		1.1 T	1.4 TITLE			Change	Addition	
NAME	FAGEN, MILDRED H.			1.2 NAME					
STREET ADDRESS	I ATAKA A MANAMATANA ALAMAMATANA			1.3 STREET ADDRESS					
CITY-ST-Z#P	MIAMI FL			1.4 CITY - ST - ZIP				}	
TITLE	PVD DELETE			2.1 TITLE			Change	Addition	
NAME	KING, WILLIAM P.			2.2 NAME				1	
STREET ADDRESS				2.3 STREET ADDRESS				İ	
CITY-ST-ZIP	MIAMI FL			2.4 CITY-ST-ZIP				l	
TITLE	OELETE			3.1 TITLE			Change	Addition	
NAME		_	3.2 N]			1	
STREET ADDRESS				3.3 STREET ADDRESS				-	
CITY-ST-ZIP					- 1				
TITLE	DELETE			3.4. CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	Change	Addition	
NAME +			4.21				ت س		
					ADDRESS				
STREET ADDRESS					1				
C(TY-ST-ZIP		☐ DELETE	_	ITY-SI	T - ZHP		Change	Addition	
· I	☐ DELETE			5.1 TIFLE			i change	Addition	
NAME			5.2 N						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		[] Deleve	_	ITY- \$1	r- ZIP		01	4.4391	
TITLE		☐ DELE TË	6111			L	Change	Addition	
NAME			6.2 N	AMÉ					
STREET ADDRESS			6.3 S	TAEET	address				
CITY-ST-ZIP				ITY-SI					
14 I barabu a	artific that the information cumplied with	this filing done not qualify for	the ove	anant	ion stated in t	Section 119 07/3Vi) Florida Statutes, Lifurther certif	that the infor	motion	

renergy certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the informatio 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 bustee 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. MILDRED H. /.... > 2 .