

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 # 389129

(8)

1. Corporation Name

JANIS ENTERPRISES, INC.



Principal Place of Business

7600 RED ROAD
223
SOUTH MIAMI FL 33143
US

Mailing Address

7600 RED ROAD
223
SOUTH MIAMI FL 33143
US

3. Date Incorporated or Qualified

09/29/1971

3a. Date of Last Report

01/25/1995

4. FEI Number

59-1369687

Applied For
Not Applicable

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

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

28 Zip Country

25

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JANIS, BERNARD
7600 RED ROAD
SUITE 223
SOUTH MIAMI FL 33143

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0902 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 of the person submitting this report (if not the registered agent, then the president or a director)

Signature of Registered Agent (signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

1.1 TITLE ☐ Change ☐ Addition

NAME
JANIS, BERNARD
STREET ADDRESS
115 ARVIDA PARKWAY
CITY, ST, ZIP
CORAL GABLES FL

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY, ST, ZIP

TITLE ☐ DELETE
NAME
MACINA, ANTHONY F. JR.
STREET ADDRESS
9731 S.W. 99TH ST.
CITY, ST, ZIP
MIAMI FL

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY, ST, ZIP

TITLE ☐ DELETE
NAME
VS
STREET ADDRESS
HOCHREITER, SUSAN
CITY, ST, ZIP
7600 RED ROAD SUITE 223
SOUTH MIAMI FL

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY, ST, ZIP

TITLE ☐ DELETE
NAME
VP
STREET ADDRESS
JANIS, RONALD
CITY, ST, ZIP
7600 RED ROAD SUITE 223
SOUTH MIAMI FL

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY, ST, ZIP

TITLE ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY, ST, ZIP

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY, ST, ZIP

TITLE ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY, ST, ZIP

6.2 NAME
6.3 STREET ADDRESS
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. I am an officer or director of the corporation or the receiver or trustee or person 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:

Bernard Janis
BERNARD JANIS

1/10/96

805-665-9201

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

CR2E034 (12/95)