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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

F48374 DOCUMENT #

(5)

JANORO FIXTURE MANUFACTURING CORP. Principal Place of Business Mailing Address 249 W. 29 ST. 249 W. 29 ST. HIALEAH FL 33012-5705 HIALEAH FL 33012-5705 3a. Date of Last Report 3. Date Incorporated or Qualified 09/24/1981 03/07/1995 Applied For 4 FEt Number 2a. Mailing Address 2. Principal Place of Business 59-2125567 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State \$5.00 May Be 6. Election Campaign Financing City & State Trust Fund Contribution Added to Fees 28 23 8. This corporation has liability for intangible tax under s 199.032, Country Zιο Yes No Florida Statutes 30 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) SOBIE, JAMES G 82 1335 DEWEY ST 83 HOLLYWOOD FL 33125 City Zip Code 85 84 11. Fursuant 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 DATE Signature, typed or printed name of registered agent and title I applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 ☐ Addition DELETE 1.1 TITLE Tille SOBIE, JAMES G. 12 NAME NAME 1335 DEWEY STREET 1.3 STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 1.4 CITY-ST-ZIP 01"Y-S*-712 Addition DELETE 2 1 TITLE PD THILE SOBIE, REBECA 2 2 NAME NAME 1335 DEWEY STREET 23 STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change T DELETE 3 1 TITLE SD M.F SOBIE, JAMES G 3.2 NAME NAME 3.3 STREET ADDRESS 1335 DEWEY ST STREET ADDRESS HOLLYWOOD FL 3 4 CITY - ST - ZIP CHIY-ST-ZIP Change Addition DELETE 4 1 TITLE 111.f 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4 4 DITY-ST-ZIP CHY-S1-2# Change ☐ Addition DELETE 5 1 TITLE 1111.5 NAM: 5.3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - 2IP CI5Y - \$1 - 76 Change Addition DELETE 6 1 TITLE THE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS.

appears in Block 12 or Block 13 if

CITY - \$1 - 7IP

ghe field, or on an attachment with an address

64 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). Fiorida 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

CR2E034 (12/95)