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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9400006126 (6)

JANE STEINBERG, INC.

Prontoit	Jai Ma	aCO.	O	EMSITIESS	
13572	40 TH	\$T	N		

Mailing Address

FILED Apr 24 1997 8:00am Secretary of State



ROYAL PALM	st n I Beach Fl 33411	13572 40TH S ROYAL PALM		3411-8436				
						3. Date Incorporated or Qualified 11/30/1994	3a. Date of La: 05/01/199	
2. Principal	Place of Business	2e. Mailing Ac	ddress			4. FEI Number		Applied For
21		26				65-0522087		Not Applicable
Suite, Api 22		Suite, Apt.				5. Certificate of Status Desired		5 Additional Required
City & Sta	ate	City & Sta	ite			Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees
Ζφ 24	Country 25	29		Country 30	,		Yes No	er s. 199 .032,
		ss of Current Registered Ager	nt		T :::-	10. Name and Address of New Re	gletered Agent	
	EINBERG, JANE			81	Name			
13572 NORTH 40TH STREET ROYAL PALM BEACH FL 33411				82 Street Add		Iress (P.O. Box Number is Not Acceptab	le)	
				83				
				84		THE RESERVE THE PROPERTY OF TH	FL	Zip Code
11. Pursuan office or agent. I	it to the previsions of Secti registered agent, or both am familiar with, and acce	ions 607.0502 and 607.1508, FI , in the State of Florida. Such ch ept the obligations of, Section 6	lorida Statute hange was ai 07.0505, Flor	s, the above uthorized by rida Statute	e-named cor y the corpore s.	poration submits this statement for the pation's board of directors. I hereby accept	ourpose of changing the appointment	ng Its registered t as registered
SIGNATURE								
		of registered agent and title it applicable. FFICERS AND DIRECTORS	(NOTE:	: Registered Ag	ent signature repu	ired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE	CODE IN 12
12.	CPS		DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICE	Char	
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neman annual report is true and accurate and mat my signature shall have the same legal effect as if made under of geiver or trustee empowered to execute this report as required by Chapter 697, Florida Statutes; and that my name littachment with an address. I am an officer or direct

SIGNATURE: