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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #	F97000037	<b>78</b>
1. Corporation Name		•

JANTASTIC INC.

Principal Place of Business

Mailing Address

## **FILED** Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90265 028 \*\*\*150.00



600 FRANKLIN ST. 2677 CHRUS LARE DR. 113A E106 SCHENECTADY NY 12305 NAPLES FL 34109			DO NOT WRITE IN	THIS SPACE
•	_	_	3. Date Incorporated or Qualifed 07/21/1997	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
24	26 PO BOX 7704	ł72	14-1790770	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State  28 NAPLES FL		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country		untry USA	This corporation owes the current ye     Personal Property Tax.	ar Intangible □ Yes <b>☑</b> No
9. Name and Address of Current	10. Name and Address of New Regist	ered Agent		
RITTBERG, ROY S		81 Name		
2671 CITRUS LAKE DR, E-106		82 Street Addre	ss (P.O. Box Number is Not Acceptable)	
NAPLES FL 34147		83		
•		84 City		FL 85 34109
<ol> <li>Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligation</li> </ol>	Florida. Such change was authorized	o by the corporation	ration submits this statement for the purpo o's board of directors. I hereby accept the	se of changing its registered appointment as registered

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change ☐ DELETE 1.1 TITLE TITLE RITTBERG, ROY S 1.2 NAME NAME 2671 CITRUS LAKE DR. E106 1070 REGENT ST 1.3 STREET ADDRESS STREET ADDRESS NAPLES, FL 34109 **NISKAYUNA NY** 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE RITTBERG, LAURAN E 2.2 NAME NAME 1070 REGENT ST 2.3 STREET ADDRESS 2671 CITRUS LAKE DR. EIOL STREET ADDRESS NAPLES, FL 34109 NISKAYUNA NY 2. 4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition 3.1 TITLE □ DELETE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CiTY-ST-ZIP ☐ DELETE ☐ Change ☐ Addition 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change □ DELETE 5.1 TITLE TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIF ☐ Change Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

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 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 appears in Block 12 or Block 13 if chapted, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

EVELOR LAURAN E. RITTBERG