## 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 # G13736 1. Corporation Name

JANTECH, INC.

Mailing Address

## FILED Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90007 015 \*\*\*150.00



Principal Place	of Business	Mailing Address							
518 BALSAWOOD COURT		518 BALSAWOOD COURT							
ALTAMONTE SPRINGS FL 32714		ALTAMONTE SPRINGS FL 32714				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed			1
						12/16/1982			
2 Principal D	ace of Business	2a. Mailing Address		<del></del>	<del></del>	4. FEI Number		Applied For	1
	ace of business	26				NOT APPLICABLE	<del> </del>	Not Applicable	1
21   Suite, Apt. #, etc.		Suite, Apt. #, etc.					\$8.7	5 Additional	1
22		27				5. Certifcate of Status Desired	Fee	Required	
City & State		City & State			-	6. Election Campaign Financing	\$5.0	May Be	1
		28				Trust Fund Contribution		d to Fees	]
Zip	Country	Zip	Co	untry		=8.=This corporation owes the current yea	r Intangible	<u></u>	ستحرا.
24	25	29	30			Personal Property Tax.	Yes	X No	1
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registe	red Agent		4
			<del></del>	81	Name				
	NOTTI, CARLO		82 Street Add			dress (P.O. Box Number is Not Acceptable)			1
	BALSAWOOD COURT								4
SUITE 1				83					1
ALTA	AMONTE SPRINGS FL 32714			84 (	City		85 Z	ip Code	┪
					-		FL		
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	tes, the a	above-n	amed corpo	oration submits this statement for the purposin's board of directors. I hereby accept the a	e of changing	its registered	{
office or r agent. I a	egistered agent, or both, in the State of m familiar with, and accept the obligation	r Florida. Such change was a ons of, Section 607.0505, Flo	orida Stai	tutes.	e corporatio			rogiotorou	
SIGNATURE		ا المستودية المستودي المستودية المستودية		7.3		<u> </u>	م المستقلم		
SIGNATORE	Signature bearing minted name of registered agent				gnature required	when reinstating) DAT	E AND DIDEO	TODE IN 42	- a
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICER	S AND DIREC		11/0
TITLE	DV 12.22	☐ DELETE		1TLE				ge	`
NAME	JANNOTTI, MARY H		I -	IAME					103
STREET ADDRESS	518 BALSAWOOD COURT			TREET AD	l l				1 6
CITY-ST-ZiP				CITY-ST-Z	IP		Chang	ge	1 5
TITLE	PD			ITLE				go	}
NAME	JANNOTTI, CARLO L			2.2 NAME					
STREET ADDRESS	518 BALSAWOOD COURT		2.3 STREET ADDRESS						
CITY-ST-ZIP	ALTAMONTE SPRINGS FL 32714		2.4 CITY-ST-ZIP 3.1 TITLE		ZIP		Chang	ge Addition	Н.
TITLE		☐ DELETE						2- D. Lorongii	
NAME				VAME =				<del></del>	
STREET ADDRESS				STREET AD					1
CITY-ST-ZIP		□ DELETE	_	CITY-ST-Z	ŽIP		☐ Chang	ge	
TITLE	,	☐ DELETE		ITLE	ļ			35	
NAME				NAME					1
STREET ADDRESS				STREET AD					
CITY-ST-ZIP		C per ere		TY-ST-Z	3P		☐ Chan	ge	,
TITLE		☐ DELETE	5.1 T	TITLE NAME				2- Lagragii	1
NAME					NDBECC				
STREET ADDRESS			1	STREET AC	ì				1
CITY-ST-ZIP		<u> </u>		CITY-ST-Z			Chan	ge	$\vdash$
TITLE		☐ DELETE		ITLE			☐ Chan	Ac Nontroll	
NAME				VAME					
STREET ADORESS				STREET AL					-
O(T) / OT 310			6.4 (	CITY-ST-Z	OP I				-1

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 changed, or on an attachment with an address, with all other like empowered.

Daytime Phone #