

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H44698

FILED
Jan 14, 2009
Secretary of State

Entity Name: JANS INVESTMENT CORP.

Current Principal Place of Business:

C/O NICHOLAS FELZEN
60 EDGEWATER DR (#15-E)
CORAL GABLES, FL 33133 US

New Principal Place of Business:

Current Mailing Address:

C/O SALLIE FELZEN
135 E 74TH ST
NEW YORK, NY 10021 US

New Mailing Address:

C/O NICHOLAS FELZEN
60 EDGEWATER DR (#15-E)
CORAL GABLES, FL 33133 US

FEI Number: 13-3268155

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FELZEN, NICHOLAS
60 EDGEWATER DR (#15-E)
CORAL GABLES, FL 33133 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: FELZEN, SALLIE
Address: 135 E 74TH ST
City-St-Zip: NEW YORK, NY 10021

Title: VDS () Delete
Name: FELZEN, PAUL
Address: 135 E 74TH ST
City-St-Zip: NEW YORK, NY 10021

Title: VD () Delete
Name: FELZEN, ANTHONY
Address: 105 FIFTH AVE
City-St-Zip: NEW YORK, NY 10003

Title: VD () Delete
Name: FELZEN, NICHOLAS
Address: 60 EDGEWATER DR (15-E)
City-St-Zip: CORAL GABLES, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL FELZEN

VDS

01/14/2009

Electronic Signature of Signing Officer or Director

_____ Date