FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

J71658

(5)

DOCUMENT #

1. Corporation Name JAN MERLE DESIGN, INC.



Principal Place of KEITH A. S. 2422 NW 36 S	SELDIN STREET	Mailing Address % KEITH A. SELDIN 2422 NW 36 STREET BOCA RATON FL 33431							
BOCA RATON FL 33431		BUCK RATUR PL 59491			 Date Incorporated or Qualified 05/07/1987 	3a. Date of Last Report 06/12/1995			
2. Principal Pla	ce of Business	2a, Mailing Address				4. FEI Number	_1	<u> </u>	pplied For
21		26				59-2805098			lot Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.	 1			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip Country		Zip 29	Countr 30			B. This corporation has liability for intangible tax under Florida Statutes			199.032,
24	9. Name and Address of Currer			Ī		10. Name and Address of New F	legisterec	l Agent	
	5 .			81	Name				
SELDIN, KEITH A. 140 INTRACOASTAL POINTE DR #401					Street Add	ess (P.O. Box Number is Not Acceptable)			
	RACUASTAL PUINTE UN #401						4		
JOI II LI	112 3377			84	City		F	85 Zq	Code
SIGNATURE _	Signature, typial or printed nature of pagistrass (a) in OFFICERS AN	ND DIRECTORS	13.			ed when recisioning ADDITIONS/CHANGES TO OF	DATE ICERS AN	ND DIRECTO	ORS IN 12
TITLE	P	DELETE	12N 13S		!				<u></u>
NAME	MERLE, JAN S. 2422 NW 36 STREET				1 ADDRESS				
STREET ADDRESS	BOCA RATON FL				Si - 7iP				
CITY-ST-ZIP TITLE	BOOK WHON'TE	DELETE		TITLE				Change	Addition
NAME		-	221	NAME					
STREET ADDRESS			23	STHEE	T ADDRESS				
CITY-ST-ZIP					ST-ZiP			E Chaona	Addition
TITLE		☐ DELETE		TITLE				☐ Change	[] Mornion
NAME				NAME					
STREET ADDRESS	1				CT ADDRESS				
CHTY - ST - ZIP		DELETE		TITLE	S1 - 7IP			Change	Addition
TITLE				NAME	i				
NAME CINCCT ADDRESS					ET ADDRESS				
STREET ADDRESS					-ST-ZIF				
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NAME			5.2	NAME	:				
STREET ADDRESS			5.3	STREI	ET ADDALSS				
CITY-ST-ZIP					· S1 · 21P			CT Cnause	Addition
TITLE		DELETE		TITLE	i			Change	☐ wagatan

14. Ido 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). 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.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

INMURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4)17/96 407-488-7087

CR2E034 (12/95)