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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

K09438

(8)

DOCUMENT #
1. Corporation Name

JANINE ENTERPRISES, INC.

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Principal Place									
r mapair ace	of Business	Mailing Address							
7015 BERAC	GC. WALSER CASA WAU STE #201	% THOMAS C. V 7015 BERACASA BOCA RATON FL	WAU STE #2	01					
BOCA HAIL	ON FL 33433	DOOR RATOR PL	. 33433			3. Date incorporated or Qualified 12/1//1987	3a. Date	6/16/	Report 1995
2. Principa! Pla	ace of Business	2a. Mailing Address				4. FEI Number 13-2595539	<u>'</u>		Applied For Not Applicable
Suite, Apt. #	#, etc.	Suite, Apt. #, etc).			5. Certificate of Status Desired		- - ·	5 Additional Required
City & State	?	City & State				Election Campaign Financing Trust Fund Contribution		+ - ·	00 May Be ed to Fees
Zip	Country	Zip	Co	untry		8. This corporation has liability for in		under	s 199.032,
24	25	29	30			Florida Statutes X Yes			
	Name and Address of Cu	rrent Registered Agent	-, ,	ļ.,,		10. Name and Address of New R	egistered A	gent	
				Bi	Name				
	er, thomas c. Beracasa way			82	Street Addre	ss (P.O. Box Number is Not Acceptab	ole)		
SUITE				83					
BOCA	RATON FL 33433			84	City			85	Zip Code
					•	ation submits this statement for the pur	FL		
	th, and accept the obligations of,	3860011 007,0303, 1 10110a 3tai	iuico.						
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable	(NOTE: Registere	d Agent	signature required		DATE		
SIGNATURE.	OFFICERS	S AND DIRECTORS	(NOTE: Registere		signature required	when reinstatings ADDITIONS/CHANGES TO OFFI	ICERS AND		
SIGNATURE _	OFFICERS		13. 1.1	TITLE	signature required		ICERS AND	DIRECT] Change	
SIGNATURE _	D BLEI, NORMA	S AND DIRECTORS	13. 1.1 1.21	TITLE			ICERS AND		
SIGNATURE _ 12. TITLE NAME	D OFFICERS BLEI, NORMA 2386 NW 59TH ST.	S AND DIRECTORS	13. 1.1 1.21 1.33	TITLE NAME STREET	ADORESS		ICERS AND		
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I do 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.

GNATURE:

Washing Prof. | 1907-991-3445

SIGNATURE: