

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **M96384** (6)

1. Corporation Name:
JEN-LOU, INC.



Principal Place of Business

Mailing Address

% ALVIN R. MAZOUREK
509 COLONIAL DR
BROOKSVILLE FL 34601

% ALVIN R. MAZOUREK
509 COLONIAL DR
BROOKSVILLE FL 34601

3. Date Incorporated or Qualified 08/29/1988	3a. Date of Last Report 03/13/1995
4. FEI Number 59-2944985	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MAZOUREK, ALVIN R.
509 COLONIAL DRIVE
BROOKSVILLE FL 34601

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.2005, Florida Statutes.

SIGNATURE

Signature type to print in Block 12 or Block 13.

Printed Name of Agent to print in Block 10.

Date

12. OFFICERS AND DIRECTORS

12.1 NAME	DP MAZOUREK, ALVIN R. 509 COLONIAL DRIVE BROOKSVILLE FL	☐ DELETE
12.2 NAME	D MAZOUREK, GEORGE C. 11395 COUNTY LINE ROAD BROOKSVILLE FL	☐ DELETE
12.3 NAME	D TAYLOR, SHARON O. 13209 OLD CRYSTAL RIV. RD BROOKSVILLE FL	☐ DELETE
12.4 NAME		☐ DELETE
12.5 NAME		☐ DELETE
12.6 NAME		☐ DELETE
12.7 NAME		☐ DELETE
12.8 NAME		☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 NAME	☐ Change ☐ Addition
13.2 NAME	
13.3 NAME	
13.4 NAME	
13.5 NAME	
13.6 NAME	
13.7 NAME	
13.8 NAME	
13.9 NAME	
13.10 NAME	
13.11 NAME	
13.12 NAME	
13.13 NAME	
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13.16 NAME	
13.17 NAME	
13.18 NAME	
13.19 NAME	
13.20 NAME	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.02(3)(g), 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 or changed, or in an attachment with my address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-7-96

904-796-2583

CR2E034 (12/95)