

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # N95000005977 (2)

1. Corporation Name

EL-JANEZ HUMAN RESOURCE AND EDUCATION CENTER, INC.



Principal Place of Business

Mailing Address

701 NW 18TH AVE  
BLDG B  
FT LAUDERDALE FL 33311

701 NW 18TH AVE  
BLDG B  
FT LAUDERDALE FL 33311

2. Principal Place of Business

2a. Mailing Address

21 Same as above

26 Same as above

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

3. Date Incorporated or Qualified  
12/20/1995

3a. Date of Last Report

4. FEI Number

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ANDERSON, JANET  
701 NW 18TH AVE  
BLDG B  
FT LAUDERDALE FL 33311

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PTD  
NAME ANDERSON, JANET  
STREET ADDRESS 701 NW 18TH AVE, BLDG B  
CITY-ST-ZIP FT LAUDERDALE FL 33311

1.1 TITLE VSK  
1.2 NAME Anderson Janet  
1.3 STREET ADDRESS 701 NW 18th Ave Bldg B  
1.4 CITY-ST-ZIP Ft Lauderdale Fl 33311

TITLE VSD  
NAME BERN, BARBARA  
STREET ADDRESS 701 NW 18TH AVE, BLDG B  
CITY-ST-ZIP FT LAUDERDALE FL 33311

2.1 TITLE PTD  
2.2 NAME Bern Barbara  
2.3 STREET ADDRESS 701 NW 18th Bldg B  
2.4 CITY-ST-ZIP Ft Lauderdale 33311

TITLE D  
NAME STEPHENSON, RICHARD II  
STREET ADDRESS 2811 66TH STREET SW  
CITY-ST-ZIP NAPLES FL 33999

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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 119.07(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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Barbara Bern President 4/27/96 954 522-3537

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CS 7/2/96

CR2E037 (12/95)