2007 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P00000022838

1. Entity Name
JANEGO CONSTRUCTION, INC.

Principal Place of Business	Mailing Address
25449 COLMAR AVE. MT. PLYMOUTH, FL 32776	PO BOX 786 SORRENTO, FL 32776

DO NOT WRITE IN THIS SPACE

04042007   No Chg-P   CR2E034 (11/05)

4. FEI Number		Applied For
59-3635557		Not Applicable

5. Certificate of Status Desired ☑   **$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

JANEGO, JOEL R
32143 WOLFBRANCH LN
SORRENTO, FL 32776

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IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE_____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00 **After May 1, 2007 Fee will be $550.00**	**9.** Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	P
NAME	JANEGO, JOEL R
STREET ADDRESS	32143 WOLFBRANCH LN
CITY-ST-ZIP	SORRENTO, FL 32776

TITLE	VP
NAME	JANEGO, KRISTA E
STREET ADDRESS	32143 WOLFBRANCH LN
CITY-ST-ZIP	SORRENTO, FL 32776

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _Krista Janego_   KRISTA JANEGO   4/4/07   407-947-3558

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #