


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 08, 2004 8:00 am
Secretary of State

07-08-2004 90190 004 ***150.00

DOCUMENT # P03000029606	
1. Entity Name JAN ELLEN ENTERPRISES, INC.	

Principal Place of Business 2200 SOUTH OCEAN LANE, SUITE 1908 FT. LAUDERDALE, FL 33316	Mailing Address 2200 SOUTH OCEAN LANE, SUITE 1908 FT. LAUDERDALE, FL 33316
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



03032004 Chg-P CR2E034 (10/03)

4. FEL Number 51-0455425		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent SCHREFF, JANICE 2200 SOUTH OCEAN LANE, SUITE 1908 FT. LAUDERDALE, FL 33316		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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 _____	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST SCHREFF, JANICE 2200 SOUTH OCEAN LANE, SUITE 1908 FT. LAUDERDALE, FL 33316 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: 	DATE: July 6th, 2004
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	



Arthur J. Tenenbaum & Company

CERTIFIED PUBLIC ACCOUNTANTS
(A PARTNERSHIP OF P.A.S.)

KRANOWITZ & TENENBAUM, CPAs, P.A. EUGENE M. WEITZ, CPA, P.A. HARRIS S. RAINBEAU, CPA, P.A.

44047647

July 6, 2004

Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Jan Ellen Enterprises, Inc.

To Whom It May Concern:

Enclosed herewith, please find the Annual Report for the above-captioned corporation. The annual report was prepared and sent to the taxpayer for signature and mailing. When the package arrived, it was inadvertently put under some papers. The error was not discovered until we, the accountants for the corporation, inquired as to the filing of the 2004 Annual Report. Corrective action was taken immediately. In this connection, we ask that you accept this report and respectfully request that the penalty be waived.

Enclosed is a check in the amount of \$150.00 payable to the Florida Department of State representing the filing fees for 2004.

Please do not hesitate to contact me should you have any questions.

Very truly yours,

Hy Kranowitz

Enclosure

HK:dls

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