DOCUMENT # P03000098828 1. Entity Name JANNUS PRODUCTIONS INC. Principal Place of Business 220 1ST AVE NORTH SI PETERSBURG, FL 33701 ST. PETERSBURG, FL 33701 ST. PETERSBURG, FL 33701 Suite, Apt. #, etc. City & State Zip Country City & State Country C	Country Name Street / City egistered office o Registered Agent sign 11.	et Address (P.O. Box Number is Not Acceptable) FL Zip Code e or registered agent, or both, in the State of Florida. I am familiar with, and accept signeture required when reinstating)
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2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. City & State City	Name Street / City egistered office of	A. FEI Number 8.3 - 0.39 36.33 Applied For Not Application 5. Certificate of Status Desired S. Certificate of Status Desired S. Certificate of Status Desired Agent F. Name and Address of New Registered Agent e e e e e e e e e e e e e e e e e e e
City & State City & State Zip Country Zip 6. Name and Address of Current Registered Agent BODZIAK, JOHN C 215 NKINA STREET NE ST. PETERSBURG, FL 33704 8. The above named entity submits this statement for the purpose of changing its rethe obligations of registered agent. SIGNATURE Signature. hyped or printed name of registered agent and title if applicable. (NOTE: FILE NOWIN FEE IS \$900.00 I0. OFFICERS AND DIRECTORS TILE P BODZIAK, JOHN C 215 NINA STEET NE STRET ADDRESS ITLE P BODZIAK, JOHN C 215 NINA STEET NE ST. PETERSBURG, FL 33704 ITLE Delete MME ST. PETERSBURG, FL 33704 ITLE Delete STRET ADDRESS ST. PETERSBURG, FL 33704	Name Street / City egistered office of	4. FEI Number Applied For Not Application 5. Certificate of Status Desired \$8.75 Additional Fee Required 7. Name and Address of New Registered Agent e at Address (P.O. Box Number is Not Acceptable) FL Zip Code e or registered agent, or both, in the State of Florida. I am familiar with, and accept aigneture required when reinstating) DATE
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SODZIAK, JOHN C ST. PETERSBURG, FL 33704 The above named entity submits this statement for the purpose of changing its retered agent. Signature: typed or printed name of registered agent and title if applicable. FILE NOWILL FEE IS \$900.00 O. OFFICERS AND DIRECTORS TILE BODZIAK, JOHN C ST. PETERSBURG, FL 33704 TILE AME IN-ST-2P ST. PETERSBURG, FL 33704 TILE AME IREET ADDRESS	Street / City egistered office of Registered Agent sign	e at Address (P.O. Box Number is Not Acceptable) EL Zip Code e or registered agent, or both, in the State of Florida. I am familiar with, and accept elgneture required when reinstating)
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IREET ADDRESS 215 NINA STEET NE ST. PETERSBURG, FL 33704	TITLE NAME	Change Addition
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ILE Delete AME TREET ADDRESS ITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TLE Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for t indicated on this report or supplemental eport is true and accurate and that my of the corporation or the receiver of truttee episodered to execute this report a changed, or on an attachment with an address, with all thre like enpowered. SIGNATURE:	the exemption star y signature shall is required by Ch	stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information all have the same legal effect as if made under oath; that I am an officer or director Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if
DIGINATORE:	RORECTOR	Date Daytime Phone #



Jaanus Productions Inc.. 220 1^{at}, Ave. North 54, Petersburg, FI 33701 Tel # 727-896-2276 Fax # 727-896-8096

Jannus Productions Inc.

May 13,2005

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Florida Department of State,

This is a request to waive reinstatement fees for this corporation due to the fact we never received a notice from your office to let us know that our 2004 annual report never went thru. We are enclosing a reinstatement form and \$150.00 for our 2005 annual report.

Thank You, John C Bodziak, dent Jannus Produtions Inc. (727) 896-2216

(727)409-5225