

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000156734

Entity Name: JANDS, INC.

**FILED**  
**Feb 29, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1293 NORTH HARBOR CITY BLVD.  
MELBOURNE, FL 32935

**New Principal Place of Business:**

**Current Mailing Address:**

1293 NORTH HARBOR CITY BLVD.  
MELBOURNE, FL 32935

**New Mailing Address:**

FEI Number: 20-0873647

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HAUCK, TRACY  
730 EAST STRAWBRIDGE AVENUE  
SUITE 202  
MELBOURNE, FL 32901 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: MRS  
Name: LUTZ, DOREEN R D  
Address: 85 SHEILA DR  
City-St-Zip: SATELLITE BCH, FL 32937 US

Title: MRS  
Name: PRESTON, STACY M P/T/D  
Address: 1813 PLANTATION CIR SE  
City-St-Zip: PALM BAY, FL 32909 US

Title: MR  
Name: LUTZ, JOSEPH J V/S/D  
Address: 85 SHEILA DR  
City-St-Zip: SATELLITE BCH, FL 32937 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: STACY M. PRESTON

P

02/29/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date