## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000115140

Entity Name: JANVESTMENTS, INC.

FILED Feb 18, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

2637 SE EMMETT ROAD
2637 SE EMMETT ROAD
2637 SE EMMETT ROAD

PORT SAINT LUCY, FL 34952 US PORT ST. LUCIE, FL 34952 US

Current Mailing Address: New Mailing Address:

1341 KNOLLCREST CIRCLE BLOOMFIELD HILLS, MI 48304 US

FEI Number: 20-3334202 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GERTZ, MICHAEL
2637 SE EMMETT ROAD
PORT SAINT LUCY, FL 34952 US
GERTZ, MICHAEL
2637 SE EMMETT ROAD
PORT ST. LUCIE, FL 34952 US

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: 02/18/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition

Name: JANISSE, JAY R Name: JANISSE, JAY R

Address: 1341 KNOLLCREST CIRCLE Address: 1341 KNOLLCREST CIRCLE
City-St-Zip: BROOMFIELD HILLS, MI 48304 US City-St-Zip: BLOOMFIELD HILLS, MI 48304 US

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition Name: GERTZ, MICHAEL Name: GERTZ, MICHAEL

Name: GERTZ, MICHAEL

Address: 2637 SE EMMETT ROAD

City-St-Zip: PORT SAINT LUCY, FL 34952 US

Name: GERTZ, MICHAEL

Address: 2637 SE EMMETT ROAD

City-St-Zip: PORT ST. LUCIE, FL 34952 US

Title: S ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 JANISSE, JAY R
 Name:

 Address:
 1341 KNOLLCREST CIRCLE
 Address:

 City-St-Zip:
 BLOOMFIELD HILLS, MI 48304 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JAY R JANISSE PRES 02/18/2008