

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Norman
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 AM 5:00

DOCUMENT # P92000011803 (3)

1. Corporation Name

JAN & LIB'S HI-TOPS, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

319 N RIDGEWOOD AVE
EDGEWATER FL 32132

Mailing Address

319 N RIDGEWOOD AVE
EDGEWATER FL 32132

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Received 12/14/1992
3a. Date of Last Report 04/26/1994

4. FEI Number 59-3154970
Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.04, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Incorporation

21

2a. Mailing Address

26

State Apt # etc

State Apt # etc

22

27

City & State

City & State

23

28

ZIP

Locality

44

Locality

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROTHERMEL, GORDON M
1217 PALMETTO ST
NEW SMYRNA BEACH FL 32168

01 Name

02 Street Address (P.O. Box Number is Not Acceptable)

03

04 City

FL

05

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0502, Florida Statutes.

SIGNATURE

Registered Agent (or authorized agent of registered agent) (Print Name)

Registered Agent (or authorized agent of registered agent) (Print Name)

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
2. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
3. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
4. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
5. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
6. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
7. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
8. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
9. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
10. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
11. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
12. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
13. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
14. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
15. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
16. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
17. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
18. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
19. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
20. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
21. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
22. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
23. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
24. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
25. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
26. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
27. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
28. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
29. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
30. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
31. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
32. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
33. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
34. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
35. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
36. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
37. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
38. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
39. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
40. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
41. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
42. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
43. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
44. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
45. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
46. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
47. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
48. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
49. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
50. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
51. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
52. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
53. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
54. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
55. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
56. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
57. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
58. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
59. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
60. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
61. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
62. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
63. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
64. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
65. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
66. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
67. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
68. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
69. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
70. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
71. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
72. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
73. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
74. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
75. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
76. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
77. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
78. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
79. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
80. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
81. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
82. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
83. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
84. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
85. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
86. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
87. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
88. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
89. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
90. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
91. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
92. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
93. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
94. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
95. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
96. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
97. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
98. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
99. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
100. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

1. NAME
2. NAME
3. NAME
4. NAME
5. NAME
6. NAME
7. NAME
8. NAME
9. NAME
10. NAME
11. NAME
12. NAME
13. NAME
14. NAME
15. NAME
16. NAME
17. NAME
18. NAME
19. NAME
20. NAME
21. NAME
22. NAME
23. NAME
24. NAME
25. NAME
26. NAME
27. NAME
28. NAME
29. NAME
30. NAME
31. NAME
32. NAME
33. NAME
34. NAME
35. NAME
36. NAME
37. NAME
38. NAME
39. NAME
40. NAME
41. NAME
42. NAME
43. NAME
44. NAME
45. NAME
46. NAME
47. NAME
48. NAME
49. NAME
50. NAME
51. NAME
52. NAME
53. NAME
54. NAME
55. NAME
56. NAME
57. NAME
58. NAME
59. NAME
60. NAME
61. NAME
62. NAME
63. NAME
64. NAME
65. NAME
66. NAME
67. NAME
68. NAME
69. NAME
70. NAME
71. NAME
72. NAME
73. NAME
74. NAME
75. NAME
76. NAME
77. NAME
78. NAME
79. NAME
80. NAME
81. NAME
82. NAME
83. NAME
84. NAME
85. NAME
86. NAME
87. NAME
88. NAME
89. NAME
90. NAME
91. NAME
92. NAME
93. NAME
94. NAME
95. NAME
96. NAME
97. NAME
98. NAME
99. NAME
100. NAME

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and clearly and truthfully for the record as stated in law (Section 199.04, Florida Statutes). I further certify that the information is stated on this annual report or supplemental annual 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 make this report as required by Chapter 199, Florida Statutes, and that my name appears in Block 13 of this filing. I will transport or mail an original of this filing with an address.

SIGNATURE:

SIGNATURE AND PRINTED NAME OF CHIEF OFFICER OR DIRECTOR

ELIZABETH P. FENICAL

4-28-95

904-438-6240