3-21-97 B- [illegible] 3440-(

FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

FILED
Mar 21 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT

1997

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

DOCUMENT # **P94000040893 (7)**

1. Corporation Name
JANTIGUE, INC.

Principal Place of Business
1254 SW STARLITE COVE
PORT ST LUCIE FL 34986

Mailing Address
1254 SW STARLITE COVE
PORT ST LUCIE FL 34986-2012

3. Date Incorporated or Qualified: **05/26/1994**
3a. Date of Last Report: **07/11/1996**

2. Principal Place of Business
21 1254 SW STARLITE Cove
Suite, Apt. #, etc.
22 PORT St Lucie.
City & State
23 Florida 34986-2012
Zip / Country
24 34986-2012 25 Port St Lucie

2a. Mailing Address
26 1254 SW Starlite Cove
Suite, Apt. #, etc.
27 PORT ST Lucie.
City & State
28 Florida
Zip / Country
29 34986-2012 30 P.S.L

4. FEI Number: **65-0498525** ☐ 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. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

JOSEPH, MORRELL W
1254 SW STARLITE COVE
PORT ST LUCIE FL 34986

10. Name and Address of New Registered Agent

81 Name: MR LEROY BENNETT JR
82 Street Address (P.O. Box Number is Not Acceptable): 2101 VALENCIA AVENUE
83 FT PIERCE - FLORIDA
84 City: FL 85 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 607.0505, Florida Statutes.

SIGNATURE: [illegible] (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☐ DELETE	1.1 TITLE	"AVP" ☐ Change ☒ Addition
NAME	JOSEPH, MORRELL W	1.2 NAME	LEROY BENNETT JR
STREET ADDRESS	1254 SW STARLITE COVE	1.3 STREET ADDRESS	2101 VALENCIA AVENUE
CITY-ST-ZIP	PORT ST LUCIE FL 34986	1.4 CITY-ST-ZIP	FT PIERCE - FL. 34946
TITLE	D ☐ DELETE	2.1 TITLE	☒ Change ☐ Addition
NAME	JOSEPH, MARJORIE E	2.2 NAME	KEYZERMAN YAFIN
STREET ADDRESS	1254 SW STARLITE COVE	2.3 STREET ADDRESS	1731 SW BONANZA ST "EX. AVP"
CITY-ST-ZIP	PORT ST LUCIE FL 34986	2.4 CITY-ST-ZIP	Port St Lucie - FL 34953
TITLE	AVP ☒ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	KEYZERMAN, YAFIM	3.2 NAME	
STREET ADDRESS	1731 SW BONANZA ST	3.3 STREET ADDRESS	
CITY-ST-ZIP	PT ST LUCIE FL 34953 MJ	3.4 CITY-ST-ZIP	
TITLE	AVP ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	LEROY BENNETT JR.	4.2 NAME	
STREET ADDRESS	2101 VALENCIA AVENUE MJ	4.3 STREET ADDRESS	
CITY-ST-ZIP	FT. PIERCE - FL. 34946	4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

CR2E034 (9/96)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated 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 execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Morrell Joseph 3-17-97 561-340-5704

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0474936