## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 08 1997 8:00am

Secretary of State

Change

Addition

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P9400053715 (6)

JANET HARGUS INC

TITLE

NAME

STREET ADORESS

SIGNATURE!

Principal Place of Business Mailing Address 4313 EL MAR DRIVE 4313 EL MAR DRIVE LAUDERDALE BY THE SEA FL 33308 LAUDERDALE BY THE		SEA FL 33908-5	019				
					3. Date Incorporated or Qualified 07/18/1994	Sa. Date of Last 04/25/1996	Report
	Place of Business	2a. Mailing Address			4. FEI Number	A	pplied For
21		26			15-0508977		lot Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		28	<u> </u>		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zipi 24	Country 25	Zip <b>29</b>	Country 30			Yes No	s. 199.032.
	9. Name and Address of Curro	ent Registered Agent	81	7-1	10. Name and Address of New Re	gistered Agent	
HARGUS, JANET 4313 EL MAR DRIVE LAUDERDALE BY THE SEA FL 33308				Name Street Add	ress (P.O. Box Number is Not Acceptable)		
			84	City		FL 85 Zip	Code
11. Pursuant office or agent 1:	t to the provisions of Sections 607.00 registered agent for both, in the Stat am familiar with, and accept the obli	602 and 607.1508, Florida Sta te of Florida. Such change wa gations of, Section 607.0505,	tutes, the abov s authorized by Florida Statute	e-named corp the corporal s.	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changing the appointment a	its registered s registered
SIGNATURE	Stgeature, typed or profed name of registered a		OTE S			DATE	
12.		ND DIRECTORS	13.	ant aignature requi	red when reinstating) ADDITIONS/CHANGES TO OFFIC		RS IN 12
TITLE	D	DELETE	1.1 TITLE	<del></del>		Change	Addition
NAME	HARGUS, JANET		1.2 NAME	{			
STREET ADDRESS			1.3 STREET	ADDRESS			
CITY-ST-ZIP	LAUDERDALE BY THE SEA (	FL 33308	1,4 CITY-5	ST-ZIP			
TITLE		☐ DELETE	2.1 TITLE			☐ Change	Addition
NAME			2.2 NAME	)			
STHEET ADDRESS			2.3 STREET	ADDRESS			
City - S1 - ZIF		DELETE	2.4 CITY-1	ST-ZIP		Change	Addition
TITLE		f""] DECEIE	3.1 TITLE 3.2 NAME	)		L_1 change	L. Audition
NAME STREET ADDRESS			3.2 NAME 3.3 STREET	ADDRESS			ļ
CITY-ST-74P			3.4. CITY-				
THUE		DELETE	4.1 TITLE	OI - EII		Change	Addition
NAME			4 2 NAME	[			_
STREET ADDRESS			4.3 STREET	ADDRESS			
CHY-ST-ZIP			4.4 CITY - 5				1
TITLE		DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY - S1 - ZIP			5.4 CITY - 9	IT-ZIP			

DELETE

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

64/CITY-\$T-ZIP

14. I do 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