Apr 29, 1999 8:00 am Secretary of State

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secret ary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9400055769

1. Corporation Name

JAN'S PRIVATE COLLECTIONS, INC.

Principal Place of Business Mailing Address							i (BEIIGE) tid Idill tidit abilt adilt
1070 SINGER (			1070 SINGER DR RIVIERA BEACH FL 33404				
							DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualifed 07/26/1994
2. Principal Place of Business 2a. Mailing Add			iling Address	ss			4. FEI Number Applied For
21			26				65-0513026 Not Applicable
Suite, Apt.	. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional
22		27	27				Fee Recuired
City & Sta	te	Cit	City & State				6. Election Campaign Financing \$5.00 May Be
23		28					Trust Fund Contribution Added to Fees
Zip	Zip Country		Zip Cou		ountry		8. This corporation owes the current year intangible
24	25	29		30			Persor al Property Tax.
	<ol><li>Name and Address of Currer</li></ol>	nt Registere	d Agent				10. Name and Address of New Registered Agent
				l	81	Name	
KRANICH, JANET T					82	Street A	Acdress (P.O. Box Number is Not Acceptable)
	0 SINGER DR				-		
RIVI	era Beach FL 33404				83		
				ļ.	84	City	85 Zip Code
					54	City	FL   J L F J
SIGNATURE	Signature, typed or printed name of registered age OFFICERS AN		DRS	13.		nt signature rec	ADDITIC INS/CHANGES TO OFFICERS / ND DIRECTOF S IN 12
TITLE	DPS		☐ DELETE	1,1 TITI	LE		☐ Change ☐ Addition
NAME KRANICH, JANET T			1.2 NAM		ME		
STREET ADDRESS 1070 SINGER DR			1.3 STR		REET	TADDRESS	
CITY-ST-ZIP	RIVIERA BEACH FL 33404			1 4 CIT	Y-\$1	T-ZIP	
TITLE	DT		☐ DELETE	2.1 TIT	LE		☐ Change ☐ Addition
NAME	KRANICH, ROGER E			2.2 NA	ME		
STREET ADDRESS	1		2.3		REET	ADDRESS	
CITY-ST-ZIP	RIVIERA BEACH FL 33404			2 4 CF		ST-ZIP	
TITLE			☐ DELETE	3 1 TIT			☐ Change ☐ Addition
NAME				3.2 NA			
STREET ADDRESS	REET ADDRE'S			3.3 STREET ADDRESS		TADDRESS	
CITY-ST-ZIP				3.4. CiT		ST-ZIP	☐ Change ☐ Addition
TITLE			☐ DELETE	4.1 TIT	LE		☐ Change ☐ Addition
NAME				4 2 NA			
STREET ADDRESS	5					T ADDRESS	
CITY-ST-ZIP				4.4 CIT		T-ZIP	Chance - Addition
TITLE			☐ DELETE	5.1 T(T)		Į	☐ Change ☐ Addition
NAME				5.2 NA			
STREET ADDRESS	5					T ADDRESS	
CITY-ST-ZIP			F∏ pereze	5.4 CIT 6.1 TIT		1-ZIP	☐ Change ☐ Addition
TITLE			☐ DELETE				
NAME	1			6.2 NA	ME		1

14. I hereby certify that the information supplied with this filling 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 a nutual 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP