

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

**FILED**  
**May 01 1998 8:00am**  
**Secretary of State**

**PROFIT CORPORATION ANNUAL REPORT 1998**



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

**DOCUMENT # P94000078512 (8)**  
 1. Corporation Name  
**JANB, INC.**



Principal Place of Business: **13260 WEST BROWARD BLVD. PLANTATION FL 33325 US**  
 Mailing Address: **13260 WEST BROWARD BLVD. PLANTATION FL 33325 US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	10/26/1994	
22	City & State	27	City & State	4. FEI Number	
23	Zip	28	Zip	65-0528963	
24	Country	29	Country	Applied For	
25		30		Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
POLANCO, JOSEFINA 6900 CYPRESS RD PLANTATION FL 33317				81 Name			
				Polanco, Josefina			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				13260 W Broward Blvd			
				83			
				84 City			
				Plantation			
				85 Zip Code			
				FL 33325			

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	Secretary
NAME	POLANCO, JOSEFINA	1.2 NAME	Ahmad Shreim
STREET ADDRESS	13260 W BROWARD BLVD	1.3 STREET ADDRESS	13260 W Broward Blvd.
CITY-ST-ZIP	PLANTATION FL	1.4 CITY-ST-ZIP	Plantation, FL 33324
TITLE	VP	2.1 TITLE	
NAME	AZEH, KHADER	2.2 NAME	
STREET ADDRESS	13260 W BROWARD BLVD	2.3 STREET ADDRESS	
CITY-ST-ZIP	PLANTATION FL	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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: *Ahmad Shreim* Ahmad Shreim 4/26/98 954 424-602

CP2E034 (10/97)