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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000089861 (6)

JANOSIK INVESTMENTS, INC.

Principal Place of Business Mailing Address 168 S.E. THIRD TERRACE 168 S.E. THIRD TERRACE CAPE CORAL FL 33990 CAPE CORAL FL 33990-10									
						3. Date incorporated or Qualified 12/12/1994		ate of Last R 20/1996	leport
	nt Place of Business	2a. Mailing Address	 , '			4. FEI Number			pplied For
21 Suite A	pt #, etc.	26				65-0549895			ot Applicable Additional
22	ηπ #, O.C.	27				5. Certificate of Status Desired			Aggironai equired
City & S	State	City & State			· · · · · · · · · · · · · · · · · · ·	Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zφ	Country	Zip	Coi	intry	/	8. This corporation has liability for	intangible	tax under s	. 199.032,
24	25	29	30		·····	Florida Statutes	Yes	No	
	9. Name and Address of Cu	rrent Registered Agent				10. Name and Address of New Re	gistered	Agent	
	ANUS, FRANK			81	Name				
168 S.E. THIRD TERRACE				82	Street Add	ess (P.O. Box Number is Not Acceptable)			
CAPE CORAL FL 33990				83	 				
				64	City		FL	85 Zip	Code
onice d agent SIGNATUR						poration submits this statement for the partition's board of directors. I hereby acce	DATE	-S	registered
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFI	CERS AN		
TITLE	PVT	DELETE	1,1 1	ITLE				Change	Addition Addition
NAME	JANUS, FRANK ss 168 SE THIRD TERRACE		1.2 N						
STREET ADDRES	CAPE CORAL FL		1		ADDRESS				
CITY - ST - ZIP TITLE	S	DELETE	1.4 C		ST-ZIP			Change	Addition
NAME	REDFERN, AUDREY E	ے منظران	2.1 V		ł			- Johnson	L. HOURDI
STREET ADDRES	AND OF THESE TERRADE				I ADDRESS				
CHY-ST-ZiP	CAPE CORAL FL		1		ST-2IP				
11ft E		DELETE						Change	Addition
NAME			3.2 N	AME	}				
STREET ADDRE	SS		3.3 \$	TREET	I ADDRESS				
C-TY-ST-ZiP				OTY-	ST-ZIP				
Title f		☐ DELETE	4.1 T	ITLE				Change	Addition
NAME			4,21	NAME					
STREET ADDRES	SS		4.3 \$	TREET	ADDRESS				
CITY - \$1 - ZIP					ST-ZIP		···		
TITLE		☐ DELETE	517	ITLE				Change	Addition

6.4 CITY-ST-ZIP 14. I do hereby cet by 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 it am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12

52 NAME

6.1 TITLE 6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

SIGNATURE:

NAMI

TITLE

NAME

STREET ADDRESS

STREEL ADDRESS

CITY - S1 - ZIP

CHY-ST-ZIP

DELETE

Change

Addition

FILED

May 12 1997 8:00am

Secretary of State