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PROFIT CORPORATION ANNUAL REPORT



ELORIDA DEPARTMENT DE STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P95000057335 (8) DOCUMENT #

1. Corporation Name Janery Fashion Inc. Principal Place of Business Mailing Address 1644 W. 41ST ST. 1644 W. 41ST ST. HIALEAH FL 33012 HIALEAH FL 33012 3. Date Incorporated or Qualified 3a. Date of Last Report 07/25/1995 4. FEI Number 2. Principal Place of Business 2a, Mailing Address Applied For 65-0599765 26 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Ζ_iρ Country 8. This corporation has liability for intengible tax under s. 199.032, Zip Country Florida Statutes -12 Yes □ No 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Warea BENITO, MARIA T 82 Street Address (P.O. Box Number is Not Acceptable) 5864 W. 26TH AVE 16 th stree 83 HIALEAH FL 33012 Zip Code 330 10 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 horeby accept the appointment as registered agent, I am familiar with, and accept the obligations of Section 907.0505, Florida Statutes. Demi SIGNATURE (NOTE: Registered Agent signature required when reinstating) rinted name of registered agent and title it applicable CR2E034 (12/95) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition 1 1 TITLE THILE Benito BENITO, MARIA T 1.2 NAME NAME STYRE 107 us. 16 5864 W. 26TH AVE. STREET ADDRESS 1.3 STREET ADDRESS FL 33010 HIALEAH FL 33012 CITY - ST - ZIP 1.4 CITY - ST - ZIP □ DELETE Change ☐ Addition 2 1 TITLE THE JUANA M Vasquez 10201 NW 31'ct VASQUEZ, JUANA M 2.2 NAME NAME 365 W. 19TH ST., #5 STREET ADDRESS 2.3 STREET ADDRESS HIALEAH FL 33010 33147 CITY-ST-ZIP 2 4 CITY - ST-ZIP DELETE Addition TITLE 3 1 TITLE Change NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4 CITY-ST-ZIP DELETE Change 4. 1 TITLE Addition TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-SI-7P 4.4 CITY - ST - ZIP DELETE Change Addition THLE 5 1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP DITY-ST-Ziff DELETE Change Addition 6 1 TITLE THLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS 64 DITY-ST-ZIP CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 cath, 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 attackment with an address.