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Jan 22 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000077299 (2)

1. Corporation Name
JANINE MARIE CORP.



Principal Place of Business

~~4001 FOREST HILL DR.~~
~~COOPER CITY FL 33026~~

Mailing Address

~~4001 FOREST HILL DR.~~
~~COOPER CITY FL 33026-1136~~

2. Principal Place of Business

21 16177 NW 14TH COURT
Suite, Apt. #, etc

22 City & State

23 PEMBROKE PINES, FL

24 33028-1218 25 BKWARD

2a. Mailing Address

26 16177 NW 14TH CT
Suite, Apt. #, etc

27 City & State

28 PEMBROKE PINES, FL

29 33028-1218 30 BKWARD

3. Date Incorporated or Qualified
10/09/1995

3a. Date of Last Report
03/15/1996

4. FEI Number
65-0611759

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

BARCALA, ROBERTO P
4001 FOREST HILL DR.
COOPER CITY FL

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 16177 NW 14TH COURT

84 City

FL

85 Zip Code
33028-1218

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

Signature typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

1-13-97

12. OFFICERS AND DIRECTORS

TITLE D
NAME BARCALA, ROBERTO P
STREET ADDRESS 4001 FOREST HILL DR.
CITY - ST - ZIP COOPER CITY FL 33026

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE D/P/S
12 NAME
13 STREET ADDRESS 16177 NW 14TH CT
14 CITY - ST - ZIP PEMBROKE PINES, FL 33028-1218

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/13/97 (954) 450-6333

CR2E034 (9/96)