

2008 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Jun 09, 2008 8:00 am
Secretary of State

05-15-2008 90030 001 ***150.00

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1. Entity Name
JANSKEN GROUP, INC.



Principal Place of Business
11508 CERCA DEL RIO PLACE
TEMPLE TERRACE, FL 33617

Mailing Address
11508 CERCA DEL RIO PLACE
TEMPLE TERRACE, FL 33617

66013715



04222008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3369001

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

STONE, DONALD M
5405 JETVIEW CIRCLE
TAMPA, FL 33634

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and fee if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be**
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	STONE, DON M
STREET ADDRESS	11508 CERCA DEL RIO PLACE
CITY-ST-ZIP	TEMPLE TERRACE, FL 33617
TITLE	D
NAME	KENNING, JANET S
STREET ADDRESS	4949 RIVER POINT RD
CITY-ST-ZIP	JACKSONVILLE, FL 32207
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: DM Stone DM Stone JUNE 2/08 813-988-1784
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone