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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STAT

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000009070 (9)

JANE'S THINGS, INC.

Principal	Place of	Business

Mailing Address

FILED May 08 1997 8:00am Secretary of State



PALM BEACH	ike blvd Gardens fl 93410	PALM BEACH GA		D-6254				
						0.1/26/1006	a. Date of Last	Report
2. Principal Pl	lace of Business	2a. Mailing Addre	oss			4. FEI Number - 65 064/9	/ -36 _A	Applied For
21		26				696067000092		Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #,	Suite, Apt. #, etc.		5. Certificate of Status Desired		Additional Required	
City & State	9	City & State				6. Election Campaign Financing Trust Fund Contribution		May Be
Zip	Country	Zip	C	ountry		8. This corporation has liability for intan		
24	25	29	30				s 🗌 No	,
	9. Name and Address of					10. Name and Address of New Registe	red Agent	
PLA	TZEK, JANE K			81	Name			
	2 NORTHLAKE BLVD			82	Ctroot Add	Iress (P.O. Box Number is Not Acceptable)		
	M BEACH GARDENS FL 3	3410			Sileet Auu	iress (r.o. box Number is Not Acceptable)		
				83				
,								
•				84	City		FL 85 Zip	Code
11. Pursuadt	to the provisions of Sections 6	07.0502 and 607.1508. Florid	la Statutes, the	above	-named cor			its registered
office or re	egistered agent, or both, in the	State of Florida, Such change	ge was authoria	zed by	the corpora	poration submits this statement for the purporation's board of directors. I hereby accept the	appointment a	s registered
and the second second	A CLOSE WILL	outigations of Section 607.	JJOJ, FIORICA G	ya(UlOS	•	4/5/05		
SIGNATURE	Signature typed or printed name of regis	lered agent and title if applicable.	(NOTE: Registe	ered Age	nt signature requ	ired whon reinstating) Dr	ATE	
12.		RS AND DIRECTORS	1 13			ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	P	☐ DE	LETE 1.1	1 TITLE			Change	Addition
NAME	Platzek, Jane K		1.2	2 NAME				
STREET ADDRESS	4382 NORTHLAKE BLVD	1	1.3	3 STREET	ADDRESS			
CITY-ST-ZIP	PALM BEACH GARDENS	FL 33410	14	4 CITY - ST	T- 71P			
TITLE		30 🔲 0£		1 111LE			☐ Change	Addition
NAME			2.2	2 NAME	- 1			
STREET ADDRESS			2.3	3 STREET	ADDRESS			
CITY-ST-ZIP				# CITY-S				
TITLE	······································	☐ DE		1 TITLE			☐ Change	Addition
NAME			3.2	2 NAME				
STREET ADDRESS			3.3	3 STREET	ADDRESS			
CITY-ST-ZIP			3.4	4 CITY-S	17 - ZIP			
TITLE		☐ DE	LE1E 4.1	1 TITLE			☐ Change	Addition
NAME			4.	2 NAME				
STREET ADDRESS			. 4.3	3 STREET	ADDRESS			
CITY-ST-ZIP			4.4	4 CITY - S	T-ZIP			
TITLE		□ DE	LETE 5.º	1 TITLE		,	Change	Addition
NAME			5.3	2 NAME	}			
STREET ADDRESS			5.3	\$ STREET	ADDRESS			
DITY-ST-ZIP	,			4 CITY-S				
TITLE		DC .		1 TITLE			☐ Change	Addition
NAME				2 NAME				•
STREET ADORESS			1		ADDRESS		-	
CITY-ST-ZIP				4 CHY-5		•		
511.1 TV WIT				· - · · · ·				

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 each, 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.