

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

FILED
Sep 18 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 1. Corporation Name

JA-NEEN'S JAMAICAN CUISINE, INC.

P960000 37647

Principal Place of Business

Mailing Address

1272 N.W. 119th Street
Miami, FL 33167

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

5/1/96

4. FEI Number

65-066-2869

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 owes or has paid the current year intangible
Personal Property Tax due June 30

☐

Yes

☐

No

2. Principal Place of Business

21 1272 NW 119 St.

Suite, Apt #, etc.

22

City & State

Miami FLA.

Zip

33167

Country

DADE

2a. Mailing Address

26 1272 NW 119 St.

Suite, Apt #, etc.

27

City & State

Miami 33167

Zip

FLA

Country

DADE

9. Name and Address of Current Registered Agent

ERROL CAMERON
6399 S.W. 103rd Street Road
Ocala, FL 34476

10. Name and Address of New Registered Agent

81 Name

CYNTHIA BLAKEY

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

4320 N.W. 23rd Street

83

84 City

Lauderhill

FL

85 Zip Code

33313

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 provisions 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

12. OFFICERS AND DIRECTORS

TITLE PRESIDENT ☒ DELETE

NAME ERROL CAMERON

STREET ADDRESS 6399 S.W. 103rd St. Road

CITY-ST-ZIP Ocala, FL 34476

TITLE V/P DIRECTOR ☒ DELETE

NAME BEVERLY JAMES

STREET ADDRESS 45 LINDEN BLVD. APT. 6C

CITY-ST-ZIP BROOKLYN, N.Y. 11226 ☐ DELETE

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE PRESIDENT/SECRETARY ☒ Change ☐ Addition

1.2 NAME CYNTHIA BLAKEY (TREASURER)

1.3 STREET ADDRESS 4320 N.W. 23rd Street

1.4 CITY-ST-ZIP Laudershill, FL 33313 ☐ Change ☐ Addition

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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]

CR2E034 (10/97)

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9.18

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P FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE, FL 32314

AUGUST 26, 1998

TO WHOM IT MAY CONCERN:

I APOLOGIZE FOR FILING MY Corporation Annual Report at this time but as a new Business owner I was not informed by my Attorney who was taking care of my paperwork etc. and because I did not receive any of your notices, I was not aware of the situation. Therefore I am asking for your consideration for waiving of the late fee.

I Guarantee that this will not happen in the future because I am now aware of the procedure and will personally take care of every detail myself.

Enclosed please find money order in the amount of \$150.00 and my completed Corporation Annual Report Packet for Janeens Jamaican Cuisine 1272 NW 119th Street Miami Florida 33167.

Thank you for your co-operation in this matter.

Sincerely

Cynthia Blakey

President