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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P96000038704 (8)

JANTEK CONTROLS, INC.

## **FILED** May 13 1998 8:00am Secretary of State



Principal Place of Business Mailing Address								I INSTINCT THE INTERVITOR OF THE ORDER OF THE		) (\$((( <b>(83</b> ))	I WHITE BLUEF F	411	
					. BOULEVARD NORTHEAST BURG FL 33704			DO NOT WRITE	IN THIS S	SPACE			
li								3. Date Incorporated or Qualified 05/03/1996					
2. Principal Place of Business				2a, Mailing Address				4. FEI Number		Applied For			
21				26				59-3376432	Not Applicable		licable		
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 Additional Fee Required			
City & State				City & State				6. Election Campaign Financing \$5.00 May Be					
23				28				Trust Fund Contribution Added to Fees					
Zip	<b>Zip</b> Country			Zip Country				8. This corporation owes or has paid the current year Intangible					
24	25				30			Personal Property Tax due June 30. Yes No					
	g, Name an	d Address of Curre	nt Regis	tered Agent		,		10. Name and Address of New Rec	istered /	agent			
	n <b>za</b> k, david					81	Name					l	
200 CENTRAL AVENUE SUITE 2000 ST. PETERSBURG FL 33701						82	Street Add	dress (P.O. Box Number is Not Acceptable	e)				
						<b>B3</b>	<del></del>			<b>*</b>			
						84	City		FL		Zip Code		
11. Pursuant t office or re agent. I ar	to the provision egistored agent m familiar with,	s of Sections 607.05 t, or both, in the Stat and accept the obli	02 and 6 e of Florid gations of	07.1508, Florida Statut da. Such change was a l, Section 607.0505, Flo	es, the ab authorized orida Stati	ove by utes	e-named cor the corpora i.	poration submits this statement for the pration's board of directors. I hereby accep	rpose of the app	changin ointment	ng its regis as regist	stered ered	
SIGNATURE	Signature, typed or p	proted name of vege ten a a	ger Land like	if applicable (NO)	L Registered	Age	nl signature requ	uired when reinstating)	DATE		<del></del>		
12. OFFICERS AN			ND DIREC	D DIRECTORS 13.				ADDITIONS/CHANGES TO OFFIC	RS AND	DIRECT	TORS IN 1	12	
TITLE	D			DELETE	1.5 (1)	LE				Chan	ge 🔲 /	Addition	
NAME	HUDGINS,	JEFFRREY S			1.2 NA	ME							
STREET ADDRESS				1.3 \$			ADDRESS )					j	
CITY-ST-ZIP	ST. PETER	SBURG FL 33704			1.4 CIT	Y - S	T- 21P						
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CITY-ST-ZIP	partify that the in	starostion currelied	with this f	iling door not qualify to	6.4 CIT			n Section 119 07/2)/i) Florido Statutos I 1	uthor co	difu she	the inferr	- ation	

I nereby certily 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 informatio 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.