

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

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Feb 24 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 # P96000057949 (5)

1. Corporation Name
JANAN CORPORATION



Principal Place of Business
1357 SOUTH EVERGREEN AVENUE
CLEARWATER FL 34616

Mailing Address
1357 SOUTH EVERGREEN AVENUE
CLEARWATER FL 34616-6512

3. Date Incorporated or Qualified 07/09/1996	3a. Date of Last Report
4. FEI Number 59-3388816	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29

9. Name and Address of Current Registered Agent ROMAN & ROMAN 2408 MAIN STREET SUITE 1 DUNEDIN FL 34608	10. Name and Address of New Registered Agent 81 Name JAMES G. HANIGAN 82 Street Address (P.O. Box Number is Not Acceptable) 1357 S. EVERGREEN AV. 83 84 City CLEARWATER FL 85 Zip Code 34616
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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: *James G. Hanigan* (NOTE: Registered Agent signature required when reinstating) DATE: Feb 19, 1997

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY - ST - ZIP D HANIGAN, JAMES G 1357 SOUTH EVERGREEN AVENUE CLEARWATER FL 34616	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY - ST - ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP D HANIGAN, NANCY H 1357 SOUTH EVERGREEN AVENUE CLEARWATER FL 34616	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY - ST - ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY - ST - ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY - ST - ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY - ST - ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY - ST - ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *James G. Hanigan* DATE: Feb 19, 1997 (F13) 442-2846
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)