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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000095340 (1)

JANUS INTERNATIONAL INC.										
Principal Place of Business 195 SW 15TH RD SUITE #502 MIAMI FL 33129		195 8	Mailing Address 195 SW 15TH RD SUITE #502 MIAMI FL 33129-1150				 1	1814 F818) I	ITAN JAH OJOH	
						3. Date Incorpora 11/21/1996	ted or Qualified	Sa. Da	ite of Last R	eport
2. Principal Pr	lace of Business	2a. M	lailing Address			4. FEI Number		4	Ar	plied For
1		26	Suite, Apt #, etc.			6	65-0722393			t Applicable
Suite, Apt. #, etc.						5, Certificate of St	5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State	On the second se	27	ity & State							·
23 Cary & Gillio	u.	28	my & Othle			6. Election Campa Trust Fund Con	-		\$5.00 Added	
≝] Zip	Country		ip	Cour	try	8. This corporatio	· · · · · · · · · · · · · · · · · · ·			
4	25	29		30	•	Florida Statutes	. ,	Yes 🛣		, ,00.002,
	9. Name and Address of	of Current Register	ed Agent			10. Name and Add	dress of New Reg	istered /	Agent	
RAU:	ZIN, JANICE I			ļ:	Name					
	SW 15TH RD SUITE #50	02		ļ.	Street Add	dress (P.O. Box Numbe	r is Not Acceptabl	e)		
MIAN	VII FL 33129									
				,	83					
					B4 City			F= 1	85 Zip	Code
		507.6500	4500 5					FL		
agent Lai SIGNATURE	to the provisions of Sections egistered agent, or both, in mi farri har with, and accept	the obligations of S	Section 607.0505, I	Florida St a tu	tes.		s, morecy accept			
agent Lac SIGNATURE 12.	milifarri bar with, and accept Signature, typict or printed traine of re OFFIC	the obligations of S	pplicable (N	OTE: Registered	168. Agent signature req	julted when reinstating)	ANGES TO OFFICE	DATE	DIRECTOR	IS IN 12
agent La SIGNATURE 12.	Signative typics or printed name of the OFFIC	the obligations of S	Section 607,0505, I	Florida Statu OTE: Registered 13.	Agent signature req	julted when reinstating)	**************************************	DATE		
agent La SIGNATURE 12. TIRE	Signative typics or printed name of the OFFIC D RAUZIN, JANICE I	the obligations of, S agestered agent and lise I ag	pplicable (N	OTE: Registered 13. 11 TITI 1.2 NAI	Agent signature req	julted when reinstating)	**************************************	DATE	DIRECTOR	IS IN 12
agent La SIGNATURE 12. TIRE NAME SIMETAL MESS	Signature typed or printed name of the OFFIC D RAUZIN, JANICE I 195 SW 15TH RD SUIT	the obligations of, S agestered agent and lise I ag	pplicable (N	OTE: Registered 13. 11 TITI 12 NAI 13 STR	Agent signature req E AE EET ADDRESS	julted when reinstating)	**************************************	DATE	DIRECTOR	IS IN 12
agent Lac SIGNATURE 12. TIRE NAME SIPLET AIR BLESS OTY-ST-ZIP	Signative typics or printed name of the OFFIC D RAUZIN, JANICE I	the obligations of, S agestered agent and lise I ag	pplicable (N	OTE: Registered 13. 11 TITI 12 NAI 13 STR	Agent signature req E ME EET ADDRESS (-ST-ZIP	julted when reinstating)	**************************************	DATE	DIRECTOR	IS IN 12
agent La SIGNATURE 12. THE NAME SIPPETAL RESS OTY-ST-ZIP	Signature typed or printed name of the OFFIC D RAUZIN, JANICE I 195 SW 15TH RD SUIT	the obligations of, S agestered agent and lise I ag	policable (N ORS DELETE	OTE: Registered 13. 11 TIVI 12 NAI 13 STR	Agent signature req E AE EET ADDRESS (-ST-ZIP) E	julted when reinstating)	**************************************	DATE	DIRECTOR Change	IS IN 12
agent Lac SIGNATURE 12. TIRE NMME SIRRETALARIESS OTY-ST-ZIP TITLE NAME	Signature typed or printed name of the OFFIC D RAUZIN, JANICE I 195 SW 15TH RD SUIT	the obligations of, S agestered agent and lise I ag	policable (N ORS DELETE	OTE: Registored 13. 11 TIT 12 NAI 13 STR 14 CIT 21 NAI 22 NAI	Agent signature req E AE EET ADDRESS (-ST-ZIP) E	julted when reinstating)	**************************************	DATE	DIRECTOR Change	IS IN 12
agent Lac SIGNATURE 12. THE NAME SIRETAL RICES OTY-ST-ZIP TRUE NAME SIRETTASURESS	Signature typed or printed name of the OFFIC D RAUZIN, JANICE I 195 SW 15TH RD SUIT	the obligations of, S agestered agent and lise I ag	policable (N ORS DELETE	OTE: Registored 13. 11 TITI 12 NAI 13 STR 14 CIT 21 TITI 22 NAI 23 STR	Agent signature req E AE EET ADDRESS Y-ST-ZIP E AE	julted when reinstating)	ANGES TO OFFICE	DATE	DIRECTOR Change	IS IN 12
agent Lac SIGNATURE 12. THE NAME SIRETAL RICHESS OTY-ST-ZIP THE NAME SIRETTAL DRESS OTT-SS-ZIP	Signature typed or printed name of the OFFIC D RAUZIN, JANICE I 195 SW 15TH RD SUIT	the obligations of, S agestered agent and lise I ag	policable (N ORS DELETE	OTE: Registored 13. 11 TITI 12 NAI 13 STR 14 CIT 21 TITI 22 NAI 23 STR	Agent signature req E AE EET ADDRESS (-ST-ZIP E EET ADDRESS Y-ST-ZIP EET ADDRESS	julted when reinstating)	ANGES TO OFFICE	DATE	DIRECTOR Change	IS IN 12
agent Lac SIGNATURE 12. TIRE NAME SIREET ALURESS OTY-ST-ZIP NAME SIREET ALURESS OTY-ST-ZIP	Signature typed or printed name of the OFFIC D RAUZIN, JANICE I 195 SW 15TH RD SUIT	the obligations of, S agestered agent and lise I ag	pplicable (NORS) DELETE	OTE: Registored 13. 11 TITI 12 NAI 13 STR 14 CIT 21 TITI 22 NAI 23 STR 2 4 CIT	Agent signature req E ME EET ADDRESS (-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E EET ADDRESS	julted when reinstating)	ANGES TO OFFICE	DATE	DIRECTOR Change Change	IS IN 12 Addition Addition
agent Las SIGNATURE 12. THE NAME SIPPET ALURESS CITY-ST-ZIP THE NAME SIPPET ALURESS CITY-SY-ZIP THE NAME SIPPET ALURESS CITY-SY-ZIP THE NAME SIPPET ALURESS	Signature typed or printed name of the OFFIC D RAUZIN, JANICE I 195 SW 15TH RD SUIT	the obligations of, S agestered agent and lise I ag	pplicable (NORS) DELETE	Toricla Statu T3. 11 TITI 12 NAI 13 STR 14 CTT 21 TITI 22 NAI 23 STR 2 4 CTT 31 TITI 32 NAI 33 STR	Agent signature req E AE EET ADDRESS (*-ST-ZIP) E EET ADDRESS Y-ST-ZIP E EET ADDRESS	julted when reinstating)	ANGES TO OFFICE	DATE	DIRECTOR Change Change	IS IN 12 Addition Addition
agent Las SIGNATURE 12. TIRE NAME SIPECTALURESS CITY-ST-ZIP TIRE NAME SIPECTALURESS CITY-ST-ZIP NAME SIPECTALURESS CITY-ST-ZIP	Signature typed or printed name of the OFFIC D RAUZIN, JANICE I 195 SW 15TH RD SUIT	the obligations of, S agestered agent and lise I ag	DELETE DELETE DELETE	Tipe Pregistered 13. 11 TIVI 12 NAI 13 STR 14 CIT 21 TIVI 22 NAI 23 STR 2 4 CIT 31 TIVI 32 NAI 33 STR 34 CIT	Agent signature req E AE EET ADDRESS Y-ST-ZIP E EET ADDRESS Y-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E AE EET ADDRESS	julted when reinstating)	ANGES TO OFFICE	DATE	DIRECTOR Change Change	S IN 12 Addition Addition Addition
agent Lac SIGNATURE 12. THE NAME SIPPET ALORESS CITY-ST-ZIP THE NAME SIPPET ALORESS CITY-ST-ZIP THE NAME SIPPET ALORESS CITY-ST-ZIP THEE THEE THEE THEE	Signature typed or printed name of the OFFIC D RAUZIN, JANICE I 195 SW 15TH RD SUIT	the obligations of, S agestered agent and lise I ag	pplicable (NORS) DELETE	OTE Registered 13. 11 TITI 12 NAI 13 STR 14 CIT 21 TITI 22 NAI 23 STR 2 4 CIT 31 TITI 32 NAI 33 STR 34 CIT 41 TITI	Agent signature req E AE EET ADDRESS Y-ST-ZIP E EET ADDRESS Y-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E EET ADDRESS	julted when reinstating)	ANGES TO OFFICE	DATE	DIRECTOR Change Change	IS IN 12 Addition Addition
agent Las SIGNATURE 12. THE NAME SIPPETALSRESS OTY-ST-ZIP THE NAME SIPPETALORESS OTY-ST-ZIP THE NAME SIPPETALORESS OTY-ST-ZIP THE NAME SIPPETALORESS OTY-ST-ZIP THE NAME	Signature typed or printed name of the OFFIC D RAUZIN, JANICE I 195 SW 15TH RD SUIT	the obligations of, S agestered agent and lise I ag	DELETE DELETE DELETE	Tipe of the state	Agent signature req E AE EET ADDRESS Y-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E ME ME ME ME ME	julted when reinstating)	ANGES TO OFFICE	DATE	DIRECTOR Change Change	S IN 12 Addition Addition Addition
agent Tac SIGNATURE 12. THE NAME SIRET ACURESS OIT-SI-ZIP	Signature typed or printed name of the OFFIC D RAUZIN, JANICE I 195 SW 15TH RD SUIT	the obligations of, S agestered agent and lise I ag	DELETE DELETE DELETE	OTE: Registored 13. 11 TITI 12 NAI 13 STR 14 CIT 21 TITI 22 NAI 23 STR 24 CIT 31 TITI 32 NAI 33 STR 34 CIT 41 TITI 42 NAI 43 STR	Agent signature req E AE EET ADDRESS Y-ST-ZIP E EET ADDRESS Y-ST-ZIP E EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E ME EET ADDRESS	julted when reinstating)	ANGES TO OFFICE	DATE	DIRECTOR Change Change	S IN 12 Addition Addition Addition
agent Tac SIGNATURE 12. THE NAME SIRETAL REGISS OTT-ST-ZIP THE NAME SIRETAL DRESS OTT-ST-ZIP THE NAME SIRETAL ALDRESS OTT-ST-ZIP THE NAME SIRETAL ALDRESS OTT-ST-ZIP THE NAME SIRETAL ALDRESS OTT-ST-ZIP	Signature typed or printed name of the OFFIC D RAUZIN, JANICE I 195 SW 15TH RD SUIT	the obligations of, S agestered agent and lise I ag	DELETE DELETE DELETE	OTE: Registored 13. 11 TITI 12 NAI 13 STR 14 CIT 21 TITI 22 NAI 23 STR 24 CIT 31 TITI 32 NAI 33 STR 34 CIT 41 TITI 42 NAI 43 STR	Agent signature req E AE EET ADDRESS (-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E ME EET ADDRESS (-ST-ZIP E ME EET ADDRESS (-ST-ZIP	julted when reinstating)	ANGES TO OFFICE	DATE	DIRECTOR Change Change	S IN 12 Addition Addition Addition
agent Lac SIGNATURE 12. THE NAME SIRECTALURESS OITY-ST-ZIP	Signature typed or printed name of the OFFIC D RAUZIN, JANICE I 195 SW 15TH RD SUIT	the obligations of, S agestered agent and lise I ag	DELETE DELETE DELETE	Tipe of the state	Agent signature req E AE EET ADDRESS (-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E ME EET ADDRESS (-ST-ZIP E ME	julted when reinstating)	ANGES TO OFFICE	DATE	Change Change Change	S IN 12 Addition Addition Addition
agent Lac SIGNATURE 12. THE NAME SIREL ALBESS OTY-ST-ZIP THE NAME SIRELT ALBESS OTY-ST-ZIP THE NAME SIRELT ALBERSS OTY-ST-ZIP THE NAME SIRELT ALBERSS OTY-ST-ZIP THE NAME SIRELT ALBERSS OTY-ST-ZIP THE	Signature typed or printed name of the OFFIC D RAUZIN, JANICE I 195 SW 15TH RD SUIT	the obligations of, S agestered agent and lise I ag	DELETE DELETE DELETE	Toricla Statu T3. 11 TIVI 12 NAI 13 STR 14 CIT 21 TAI 23 STR 2 4 CIT 31 TAI 33 STR 34 CIT 41 TIVI 4 2 NAI 43 STR 44 CIT 51 TIVI 52 NAI	Agent signature req E AE EET ADDRESS (-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E ME EET ADDRESS (-ST-ZIP E ME	julted when reinstating)	ANGES TO OFFICE	DATE	Change Change Change	S IN 12 Addition Addition Addition
agent Tar SIGNATURE 12. THE NAME SIRETALURESS OTY-ST-ZIP THE	Signature typed or printed name of the OFFIC D RAUZIN, JANICE I 195 SW 15TH RD SUIT	the obligations of, S agestered agent and lise I ag	DELETE DELETE DELETE	Toricla Statu T3. 11 TITI 12 NAI 13 STR 14 CTT 21 TATI 22 NAI 23 STR 2 4 CTT 31 TATI 32 NAI 33 STR 34 CTT 41 TATI 4 2 NAI 43 STR 44 CTT 51 TATI 53 STR	Agent signature req E AE EET ADDRESS (-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E ME AE AE AE AE AE AE AE AE	julted when reinstating)	ANGES TO OFFICE	DATE	Change Change Change	S IN 12 Addition Addition Addition
agent Las SIGNATURE 12. THE NAME SIRETALURESS OTY-ST-ZIP	Signature typed or printed name of the OFFIC D RAUZIN, JANICE I 195 SW 15TH RD SUIT	the obligations of, S agestered agent and lise I ag	DELETE DELETE DELETE	Toricla Statu T3. 11 TITI 12 NAI 13 STR 14 CTT 21 TATI 22 NAI 23 STR 2 4 CTT 31 TATI 32 NAI 33 STR 34 CTT 41 TATI 4 2 NAI 43 STR 44 CTT 51 TATI 53 STR	Agent signature req E AE EET ADDRESS (*-ST-ZIP) E EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E ME EET ADDRESS (*-ST-ZIP) E AE EET ADDRESS (*-ST-ZIP) E AE EET ADDRESS (*-ST-ZIP)	julted when reinstating)	ANGES TO OFFICE	DATE	Change Change Change	S IN 12 Addition Addition Addition
agent Lar SIGNATURE	Signature typed or printed name of the OFFIC D RAUZIN, JANICE I 195 SW 15TH RD SUIT	the obligations of, S agestered agent and lise I ag	DELETE DELETE DELETE	Toricla Statu T3. 11 TITI 12 NAI 13 STR 14 CTT 21 TATI 22 NAI 23 STR 2 4 CTT 31 TITI 42 NAI 33 STR 34 CTT 41 TITI 42 NAI 43 STR 44 CTT 51 TITI 52 NAI 53 STR	Agent signature req E AE AE EET ADDRESS (*-ST-ZIP) E AE EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E ME EET ADDRESS (*-ST-ZIP) E AE EET ADDRESS (*-ST-ZIP) E AE EET ADDRESS (*-ST-ZIP) E AE EET ADDRESS (*-ST-ZIP) E	julted when reinstating)	ANGES TO OFFICE	DATE	DIRECTOR Change Change Change	S IN 12 Addition Addition Addition Addition
AGENT TAIL SIGNATURE 12. THE NAME SHEET ALURESS OTY-ST-ZIP THE NAME SHEET ADORESS OTY-ST-ZIP THE NAME SHEET ADORESS OTY-ST-ZIP THE	Signature typed or printed name of the OFFIC D RAUZIN, JANICE I 195 SW 15TH RD SUIT	the obligations of, S agestered agent and lise I ag	DELETE DELETE DELETE	Tipe of the provided state of the provided s	Agent signature req E AE AE EET ADDRESS (*-ST-ZIP) E AE EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E ME EET ADDRESS (*-ST-ZIP) E AE EET ADDRESS (*-ST-ZIP) E AE EET ADDRESS (*-ST-ZIP) E AE EET ADDRESS (*-ST-ZIP) E	julted when reinstating)	ANGES TO OFFICE	DATE	DIRECTOR Change Change Change	S IN 12 Addition Addition Addition Addition

SIGNATURE:

(305)856-9009

FILED

May 16 1997 8:00am

Secretary of State