

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1998**



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

**FILED**  
**Sep 17 1998 8:00am**  
**Secretary of State**

DOCUMENT # **P97000031212 (8)**  
1. Corporation Name

**JANCO INTERNATIONAL INC.**



Principal Place of Business

**9516 S.W. 166 COURT  
MIAMI FL 33196**

Mailing Address

**9516 S.W. 166 COURT  
MIAMI FL 33196**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**04/01/1997**

4. FEI Number

**65-0743937**

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

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**NUNEZ, ADRIAN  
9516 S.W. 166 COURT  
MIAMI FL 33196**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

**FL** 85 Zip Code

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

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 **D** ☐ DELETE

NAME **NUNEZ, ADRIAN**  
STREET ADDRESS **9516 S.W. 166 COURT**  
CITY-STATE-ZIP **MIAMI FL 33196**

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

**300002646133**  
**-09/22/98--01051--008**  
**\*\*\*150.00**

**pe**  
**9.17**

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

**8/7/98**

**305 447-2225**

CR2E034 (5/98)

2

July 20, 1998

Florida Department of State  
Division of Corporations  
PL 02 The Capitol  
Tallahassee, FL 32399-0250

RE: P97000031212 (8)

To Whom It May Concern:

I am writing in regards to the above referenced corporation, JANCO International, Inc. I recently received a second notice annual report form. I regret to inform you that I never received the first notice and would kindly request a waiver of the late fee. I spoke with someone in the department and he informed me to put the request in writing. Therefore, along with this letter, I have enclosed my payment, which does not include the late fee.

Please do not hesitate to contact me with any questions or comments. Thank you for your attention to this matter.

Regards,



Adrian O. Nunez  
9516 SW 166 Court  
Miami, FL 33196  
(305) 387-8308