2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P97000046224

1. Entity Name
JANNA'S FINE CONSIGNER APPAREL, INC.

Principal Place of Business	Mailing Address
268 INDIAN ROCKS ROAD	268 INDIAN ROCKS ROAD
BELLEAIR BLUFFS, FL 33770	BELLEAIR BLUFFS, FL 33770

DO NOT WRITE IN THIS SPACE

01252008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
59-3448831	Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

QUINN, JANNA
268 INDIAN ROCKS ROAD
BELLEAIR BLUFFS, FL 33770

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE_____
Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	D
NAME	QUINN, JANNA
STREET ADDRESS	268 INDIAN ROCKS ROAD
CITY-ST-ZIP	BELLEAIR BLUFFS, FL 33770
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000848722
03/20/08-80027-015 150.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _Janna Quinn_   3/3/08 (727) 584-9222
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #