

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2008 08:00 AM
Secretary of State

DOCUMENT # P97000077023

1. Entity Name
JAN DEVELOPMENT INC.



Principal Place of Business
2575 SW 14 ST
BOYNTON BEACH, FL 33426 US

Mailing Address
2575 SW 14 ST
BOYNTON BEACH, FL 33426 US



01082008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0778593

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MILLER, JANICE
2575 SW 14 ST
BOYNTON BEACH, FL 33426

**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)

U0000085214

01/16/08-80087-007 150.00

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 DP
NAME MILLER, JANICE
STREET ADDRESS 2575 SW 14 ST
CITY-ST-ZIP BOYNTON BEACH, FL 33426

TITLE VP
NAME PARTINGTON, GEORGE
STREET ADDRESS 2575 SW 14 ST
CITY-ST-ZIP BOYNTON BEACH, FL 33426

TITLE SV
NAME WEINBROM, HEATHER
STREET ADDRESS 2575 SW 14 ST
CITY-ST-ZIP BOYNTON BEACH, FL 33426

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/9/08

Date

561-736-5127

Daytime Phone #