

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

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Apr 11 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S05332 (9)

1. Corporation Name
JANSEN U.S. HOLDINGS, INC.



Principal Place of Business C/O BETTINA LAMBRECHTS BROWARD FIN. CENTER 500 E. BROWARD BLVD SUITE 1180 FT. LAUDERDALE FL 33301 US	Mailing Address C/O BETTINA LAMBRECHTS BROWARD FIN. CENTER 500 E. BROWARD BLVD SUITE 1180 FT. LAUDERDALE FL 33394-3002 US
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3. Date Incorporated or Qualified 10/09/1990	3a. Date of Last Report 07/01/1996
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2. Principal Place of Business 21 1508 SE 3 AVE Suite, Apt. #, etc. 22 City & State 23 FT. LAUDERDALE, FL Zip 24 33316	2a. Mailing Address 26 1508 SE 3 AVE Suite, Apt. #, etc. 27 City & State 28 FT. LAUDERDALE, FL Zip 29 33316	4. FEI Number 65-0218342 Applied For 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 type="checkbox"/> No
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9. Name and Address of Current Registered Agent LAMBRECHTS, BETTINA C/O REAL FLORIDA REALTY 500 E. BROWARD BLVD. #1180 FT. LAUDERDALE FL 33394	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code
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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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D JANSSEN, HANS GERT	1.1 TITLE	
NAME	BROWARD FINANCIAL CENTER 500 E. BROWARD,	1.2 NAME	
STREET ADDRESS	FT. LAUDERDALE FL 33301	1.3 STREET ADDRESS	1508 SE 3 AVE
CITY - ST - ZIP		1.4 CITY - ST - ZIP	FT. LAUDERDALE, FL 33316
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0292836

CR2E034 (9/96)