

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 11:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S05818** (7)

1. Corporation Name

JANETTE'S OF NEW YORK INTERNATIONAL FASHION INC.

New Address

*7320 NW 85th Bldg 8203
TAMARAC FL 33321*

Principal Place of Business

Mailing Address

~~1515 UNIVERSITY DRIVE
CORAL SPRINGS FL 33071~~

~~1515 UNIVERSITY DRIVE
CORAL SPRINGS FL 33071~~

*7320 NW 85th Bldg 8203
TAMARAC FL 33321*

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TAMARAC FL 33321*

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 01/01/1991	3a. Date of Last Report 05/01/1994
4. FEI Number 65-0234108	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 has liability for intangible tax under S. 189.032 Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc. 8203	26. Suite, Apt. #, etc. 8203
22. City & State TAMARAC FL	27. City & State TAMARAC FL
24. Zip 33321	29. Zip 33321

9. Name and Address of Current Registered Agent

**ALLEN, ERIC R.
1515 UNIVERSITY DRIVE
CORAL SPRINGS FL 33071**

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL

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 terminating)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	D
NAME	ANDERSON, JANET
STREET ADDRESS	1515 UNIVERSITY DR #210
CITY ST ZIP	CORAL SPRINGS FL TAMARAC FL 33321
TITLE	D
NAME	ALLEN, ERIC R.
STREET ADDRESS	17070 COLLINS AVE #208
CITY ST ZIP	MIAMI BEACH FL
TITLE	D
NAME	BLOOM, JERRY
STREET ADDRESS	7320 N.W. 85TH CT., #8203
CITY ST ZIP	TAMARAC FL
TITLE	D
NAME	BERN, BARBARA
STREET ADDRESS	60 WASHINGTON AVENUE
CITY ST ZIP	LAWRENCE NY
TITLE	D
NAME	HALES, J.
STREET ADDRESS	60 WASHINGTON AVENUE
CITY ST ZIP	LAWRENCE NY
TITLE	D
NAME	KING, JEANNETTE L.
STREET ADDRESS	8781 N. W. 7TH COURT
CITY ST ZIP	PEMBROKE PINES FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY ST ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY ST ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY ST ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY ST ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY ST ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(8)(b), 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 by or with, 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. (If the signature appears in Block 12 or Block 13, it is changed, or an appointment with an address)

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

4/24/96 305 728 8400
DATE