

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

FILED

May 01 1998 8:00am
Secretary of State

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| PROFIT CORPORATION ANNUAL REPORT 1998 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
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DOCUMENT # S66115 (4)
1. Corporation Name
JANT SALES, INC.



Principal Place of Business
665 NE 105TH ST
N MIAMI BEACH FL 33179

Mailing Address
665 NE 105TH ST
N MIAMI BEACH FL 33179

DO NOT WRITE IN THIS SPACE

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|--|--|--|--|--|--|
| 2. Principal Place of Business 21 19880 Dean Dr. Suite, Apt. #, etc. | | 2a. Mailing Address 26 19880 Dean Dr. Suite, Apt. #, etc. | | 3. Date Incorporated or Qualified 07/08/1991 | |
| 22 City & State 23 Boca Raton, FL Zip 24 33434 Country 25 USA | | 27 City & State 28 Boca Raton, FL Zip 29 33434 Country 30 USA | | 4. FEI Number 65-0274008 Applied For Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| 7. \$8.75 Additional Fee Required | | 9. \$5.00 May Be Added to Fees | | | |

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| 9. Name and Address of Current Registered Agent FREIRICH, JACK 665 NE 105TH ST N MIAMI BEACH FL 33179 19880 Dean Dr. Boca Raton, FL 33434 | | 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 | |
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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

| | | | |
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| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D Pres. FREIRICH, JACK 665 NE 105TH ST N MIAMI BEACH FL | 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP | Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/> 19880 Dean Dr. Boca Raton, FL 33434 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D Secy Treas. FREIRICH, JANET 665 NE 105TH ST N MIAMI BEACH FL | 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP | Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/> 19880 Dean Dr. Boca Raton, FL 33434 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> DELETE | 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP | Change <input type="checkbox"/> Addition <input type="checkbox"/> |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> DELETE | 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP | Change <input type="checkbox"/> Addition <input type="checkbox"/> |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> DELETE | 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP | Change <input type="checkbox"/> Addition <input type="checkbox"/> |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> DELETE | 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP | Change <input type="checkbox"/> Addition <input type="checkbox"/> |

14. 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: Jack Freirich 4/27/98 (S61) 474-2031

CP2E034 (10/97)