

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

FILED

Feb 23 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	--

DOCUMENT # 231522 (4)  
1. Corporation Name  
SLACK & JOHNSTON, INC.



Principal Place of Business 1570 MADRUGA AVENUE SUITE 403 CORAL GABLES FL 33146	Mailing Address 1570 MADRUGA AVENUE SUITE 403 CORAL GABLES FL 33146
--	--

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 7300 N. KENDALL DR. Suite, Apt. #, etc. 22 SUITE 520 City & State 23 MIAMI, FL Zip 33156 24 FL Country 25 USA		2a. Mailing Address 26 7300 N. KENDALL DR. Suite, Apt. #, etc. 27 SUITE 520 City & State 28 MIAMI, FL Zip 33156 29 FL Country 30 USA		3. Date Incorporated or Qualified 12/29/1959	4. FEI Number 59-0881523 Applied For Not Applicable	5. Certificate of Status Desired <input checked="" 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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No
--	--	---	--	---	--	--	--	--

9. Name and Address of Current Registered Agent SLACK, SUE BARRETT 1570 MADRUGA AVENUE SUITE 403 CORAL GABLES FL 33146				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 7300 N. KENDALL DR. 83 SUITE 520 84 City MIAMI FL 85 Zip Code 33156			
--	--	--	--	---	--	--	--

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: Sue Barrett Slack SUE BARRETT SLACK, President 2/16/98  
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	PD	NAME	SLACK, SUE BARRETT	1.1 TITLE	Change	Addition	
STREET ADDRESS	1570 MADRUGA, STE 403	1.2 NAME		1.3 STREET ADDRESS	7300 N. KENDALL DR., SUITE 520		
CITY - ST - ZIP	CORAL GABLES FL	1.4 CITY - ST - ZIP		1.4 CITY - ST - ZIP	MIAMI, FL 33156		
TITLE	VDSY	NAME	JOHNSTON, L GLENN	2.1 TITLE	Change	Addition	
STREET ADDRESS	7840 SW 168 STREET	2.2 NAME		2.3 STREET ADDRESS	7300 N. KENDALL DR., SUITE 520		
CITY - ST - ZIP	MIAMI FL	2.4 CITY - ST - ZIP		2.4 CITY - ST - ZIP	MIAMI, FL 33156		
TITLE		NAME		3.1 TITLE	Change	Addition	
STREET ADDRESS		3.2 NAME		3.3 STREET ADDRESS			
CITY - ST - ZIP		3.4 CITY - ST - ZIP		3.4 CITY - ST - ZIP			
TITLE		NAME		4.1 TITLE	Change	Addition	
STREET ADDRESS		4.2 NAME		4.3 STREET ADDRESS			
CITY - ST - ZIP		4.4 CITY - ST - ZIP		4.4 CITY - ST - ZIP			
TITLE		NAME		5.1 TITLE	Change	Addition	
STREET ADDRESS		5.2 NAME		5.3 STREET ADDRESS			
CITY - ST - ZIP		5.4 CITY - ST - ZIP		5.4 CITY - ST - ZIP			
TITLE		NAME		6.1 TITLE	Change	Addition	
STREET ADDRESS		6.2 NAME		6.3 STREET ADDRESS			
CITY - ST - ZIP		6.4 CITY - ST - ZIP		6.4 CITY - ST - ZIP			

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: Sue Barrett Slack 2/16/98 (305) 670-2111  
Signature, typed or printed name of signing officer or director

CR2E034 (10/97)