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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9800005415

1. Corporation Name

FRANK-N-SLIDE ENTERPRISES, INC.

Principal Place of Business	Ma
1884 SOUTH THIRD STREET	188
TACKGONVILLE DEACH EL 20050	.146

Mar 24, 1999 8:00 am Secretary of State

03-24-1999 90025 041 ***150.00



Principal Place	e of Business	Mailing Address				1 1881188 1119 18181 18111 88111 1	18131 88331 88111 883	Rt Bitte Binne i	iledi Etti teat
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	VILLE BEACH FL 32250 JACKSONVILLE BEACH FL 32250				DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualifed		PACE	
						09/28/1998			}
9 Dincinal D	Name of Business	2a. Mailing Addre				4. FEI Number		Apr	plied For
<u></u>	lace of Business	2a. Mailing Addre	733			54-1565391			t Applicable
Suite, Apt.	# etc	Suite, Apt. #,	etc					\$8.75 A	
22	w, etc.	27	•••			5. Certifcate of Status Desired	□	Fee Re	I
City & Stat	le	City & State				8. Election Campaign Financing		\$5.00	May Be
23	-	28				Trust Fund Contribution	'	Added to	, i
Zip	Country	Zip		Country		8. This corporation owes the cu	rrent year Intan	gible	.]
24	25	29	30]		Personal Property Tax.		Δ	□No
	9. Name and Address of Current	Registered Agent				10. Name and Address of New	Registered A	gent	
				81	Name		•		
	AKOSKI, FRANCIS J			82	Street A	ddress (P.O. Box Number is Not Accep	table)		
	4 SOUTH THIRD STREET				<u> </u>				
JACI	KSONVILLE BEACH FL 32250			83					1
				84	City			85 Zip C	Code
					\ '		ᅡᆫ		
44 Dureuant	to the provisions of Sections 607.0502	and 607.1508, Florid	da Statutes,	the above	e-named o	orporation submits this statement for the	e purpose of ch ent the appointr	ianging its ment as rec	registered
office or a	envisioned agant or both in the State c		na was authr	orized by	the cornor				
l office or r	registered agent, or both, in the State of am familiar with, and accept the obligati	of Florida. Such chang ions of, Section 607.0	re was autho	orized by	the corpor	alion's pogra of directors. Thereby according	spr are appoint		Jistereo
office or r agent. I a	am familiar with, and accept the obligati	ions of, Section 607.0	ge was autho)505, Florida	orized by Statutes	the corpor				Jistereo
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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, with all other like empowered.

6.4 CITY-ST-ZIP

CITY-ST-ZIP