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**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # L96011

(6)

JACKS FOR SLACKS OF BOCA RATON, INC.

**FILED** May 04 1998 8:00am Secretary of State



Principal Plac	ce of Business	Mailing Address	ailing Address			r jamijait mim idrit ditti duidt tiffat tifft firft fillt bifit fifft fifft fifft fifft			
430 SW 12 AVE		430 SW 12 AVE							
DEERFIELD BCH FL 33442		DEERFIELD BOH FL 33442				DO NOT WRITE IN THIS SPACE			
l US		US				3. Date Incorporated or Qualified			
						08/27/1990			
2. Principal P	Place of Business	2a. Mailing Address				4. FEI Number Applied For			
21 2 3060	O SANDALFOOT PLZ	26 23060 SANDALFOOT PLZ			T TLZ	65-0219240 Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			ER 75 Additional				
22 DRIVE		27 DR.				5. Certificate of Status Desired Fee Required			
City & State		City & State			6. Election Campaign Financing \$5.00 May Be				
23 BOCH	RATON FL.	28 BICA RAT	ON,	F	-6	Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Coun		_	8. This corporation owes or has paid the current year Intangible			
24 3342			30	U	SA	Personal Property Tax due June 30. X Yes No			
	9, Name and Address of Current	Registered Agent				10. Name and Address of New Registered Agent			
GO	OLDSTEIN. DAVID		] 8	B1   1	Name				
773	39 VILLA NOVA DR. N .		١,	B2 5	Street Addre	ress (P.O. Box Number is Not Acceptable)			
	ICA RATON FL 33433			~   `	Olfoot Addit	das (1.0. box Homber is Hot Acceptable)			
			8	B3					
			-		0::				
			*	84 (	City	FI 85 Zip Code			
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statuter	, the abo	ove-n	named corp	poration submits this statement for the purpose of changing its registered			
office or r	registered agent, or both, in the State o im familiar with, and accept the obligati	f Florida, Such change was au ons of Section 607 0505, Flor	thorized ida Statul	by th	ne corporati	poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered			
SIGNATURE									
SIGNATURE	Signature, typed or printed name of registered agent	and fille if applicable (NOTE:	Registered A	Agent s	signature require	red when reinstating) DATE			
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	<b>□</b> DELETE	1.1 TITLE	E		Change Addition			
NAME	GOLDSTEIN, DAVID		1.2 NAM	<b>AE</b>					
STREET ADDRESS	7739 VILLA NOVA DR. N.		1.3 STRE	EET AD	DRESS				
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY	r-\$t-2	ZIP				
TITLE		☐ DELETE	2.1 THUS	£		Change Addition			
NAME			2.2 NAM	Æ	·				
STREET ADDRESS			2.3 STRE	EET AD	DRESS				
CITY-ST-ZIP			2.4 CITY	Y-ST-2	ZIP				
TITLE		☐ DELETE	3.1 TITLE	.E		Change Addition			
NAME			3.2 NAM	Æ					
STREET ADDRESS			3.3 STRE	EET ADI	DRESS				
CITY-ST-ZIP			3.4. CITY	Y-ST-	ZIP				
TITLE		DELETE	4.1 TITLE	E		☐ Change ☐ Addition			
NAME			4. 2 NAM	ME					
STREET ADDRESS			4.3 STRE	EET AD	ORESS				
CITY-ST-ZIP			4.4 CITY	/- ST- Z	ZIP				
TITLE		OELETE	5.1 TITLE			Change Addition			
NAME			5.2 NAM	1E					
STREET ADDRESS			5.3 STRE		DRESS				
CITY-ST-ZIP			5.4 CITY		ſ				
TITLE		☐ DELETE	6 1 TITLE			Change Addition			
NAME		-	6.2 NAMI						
STREET ADDRESS			6.3 STRE		DRESS				
CITY-ST-ZIP			6.4 City						
	certify that the information supplied with	this filing does not qualify for				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.