

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

FILED  
Apr 18 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # M79875 (4)  
1. Corporation Name  
JACK'S FOR SLACKS OF DEERFIELD BEACH, INC.



Principal Place of Business Mailing Address  
1580 SE 3RD COURT 1580 SE 3RD COURT  
DEERFIELD BEACH FL 33441 DEERFIELD BEACH FL 33441-4417

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 430 SW 12th AVE  
22 City & State 27  
23 DEERFIELD BEACH FL  
24 Zip 25 Country 29 33442 30 Broward

3. Date Incorporated or Qualified 05/09/1988 3a. Date of Last Report 05/01/1996  
4. FEI Number 65-0057932 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. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

GOLDSTEIN, IRVING  
23360 MIRABELLA CIR S  
BOCA RATON 33433

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

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

| 12. OFFICERS AND DIRECTORS |                       |        |  | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |        |          |  |
|----------------------------|-----------------------|--------|--|---|--------|----------|--|
| TITLE                      | D                     | DELETE |  | 1.1 TITLE   | Change | Addition |  |
| NAME                       | GOLDSTEIN, IRVING     |        |  | 1.2 NAME  |        |          |  |
| STREET ADDRESS             | 23360 MIRABELLA CIR S |        |  | 1.3 STREET ADDRESS                                    |        |          |  |
| CITY-ST-ZIP                | BOCA RATON FL         |        |  | 1.4 CITY-ST-ZIP                                       |        |          |  |
| TITLE                      | TS                    | DELETE |  | 2.1 TITLE   | Change | Addition |  |
| NAME                       | GOLDSTEIN, DAVID      |        |  | 2.2 NAME  |        |          |  |
| STREET ADDRESS             | 7739 VILLA NOVA DR N  |        |  | 2.3 STREET ADDRESS                                    |        |          |  |
| CITY-ST-ZIP                | BOCA RATON FL         |        |  | 2.4 CITY-ST-ZIP                                       |        |          |  |
| TITLE                      |                       | DELETE |  | 3.1 TITLE   | Change | Addition |  |
| NAME                       |                       |        |  | 3.2 NAME  |        |          |  |
| STREET ADDRESS             |                       |        |  | 3.3 STREET ADDRESS                                    |        |          |  |
| CITY-ST-ZIP                |                       |        |  | 3.4 CITY-ST-ZIP                                       |        |          |  |
| TITLE                      |                       | DELETE |  | 4.1 TITLE   | Change | Addition |  |
| NAME                       |                       |        |  | 4.2 NAME  |        |          |  |
| STREET ADDRESS             |                       |        |  | 4.3 STREET ADDRESS                                    |        |          |  |
| CITY-ST-ZIP                |                       |        |  | 4.4 CITY-ST-ZIP                                       |        |          |  |
| TITLE                      |                       | DELETE |  | 5.1 TITLE   | Change | Addition |  |
| NAME                       |                       |        |  | 5.2 NAME  |        |          |  |
| STREET ADDRESS             |                       |        |  | 5.3 STREET ADDRESS                                    |        |          |  |
| CITY-ST-ZIP                |                       |        |  | 5.4 CITY-ST-ZIP                                       |        |          |  |
| TITLE                      |                       | DELETE |  | 6.1 TITLE   | Change | Addition |  |
| NAME                       |                       |        |  | 6.2 NAME  |        |          |  |
| STREET ADDRESS             |                       |        |  | 6.3 STREET ADDRESS                                    |        |          |  |
| CITY-ST-ZIP                |                       |        |  | 6.4 CITY-ST-ZIP                                       |        |          |  |

14. I do 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: IRVING GOLDSTEIN 4/10/97 (974) 427-XXXX

CR2E034 (9/96)