

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 12, 2008 8:00 am
Secretary of State

06-12-2008 90001 048 ***150.00

DOCUMENT # P04000011688

1. Entity Name
S.L.A.K., INC.



Principal Place of Business

509 SCHICKASAW TERR
ORLANDO, FL 32825

Mailing Address

509 SCHICKASAW TERR
ORLANDO, FL 32825

60044353



04302008 No Chg-P CR2E034 (11/05)

4. FEI Number
58-2683804

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

FRANKLIN, LYNN
509 CHICKASAW TER
ORLANDO, FL 32825

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DP
FRANKLIN, LYNN
509 S CHICKASAW TR
ORLANDO, FL 32825

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LYNN FRANKLIN

Date

Daytime Phone #

4/30/08 407-382-3787

SLAK INC.
DBA The UPS Store 1984
425 South Chickasaw Trail
Orlando, FL 32825
407-382-3787

ATTACHMENT

63-751631

2031

60044353

#004000011688

Date 4/30/08

Pay to the
Order of

U.S. TREASURY

\$ 2307.00

Twenty Three Hundred and 07/100

Dollars

Security
Features
Details on
back

WACHOVIA
Wachovia Bank, N.A.
wachovia.com

For 004000011688

[Signature]