

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 22, 1999 8:00 am
Secretary of State

04-22-1999 90235 019 ***150.00

DOCUMENT # P980000351040

1. Corporation Name

Get Slim Too, Inc.



Principal Place of Business

3209 N. Ridge Road W.
Ashtabula, OH 44004

Mailing Address

4104 High Mountain Dr.
Raleigh, NC 27603

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

April 15, 1998

4. FEI Number

58-2387915

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 owes the current year Intangible
Personal Property Tax.



Yes



No

9. Name and Address of Current Registered Agent

Robert J. Slotkin, Esquire
3326 N.E. 33rd Street
Fort Lauderdale, FL 33308

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

TITLE	Secretary/Director	<input checked="" type="checkbox"/> DELETE
NAME	David C. Wall, Sr.	
STREET ADDRESS	3431 N. 77th Way	
CITY-ST-ZIP	Hollywood, FL 33024	
TITLE	President/Director	<input checked="" type="checkbox"/> DELETE
NAME	William J. Wall	
STREET ADDRESS	3431 N. 77th Way	
CITY-ST-ZIP	Hollywood, FL 33024	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Secretary/Director	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
1.2 NAME	Michael W. Wall		
1.3 STREET ADDRESS	3209 N. Ridge Road West		
1.4 CITY-ST-ZIP	Ashtabula, OH 44004		
2.1 TITLE	President/Director	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
2.2 NAME	Michael W. Wall		
2.3 STREET ADDRESS	3209 N. Ridge Road West		
2.4 CITY-ST-ZIP	Ashtabula, OH 44004		
3.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
6.2 NAME			
6.3 STREET ADDRESS			
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 with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-13-99 (44) 998-3589
Date Daytime Phone #

CR2E034 (1/98)