PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # **P98000048578**1. Corporation Name

JACK'S FOR SLACKS OF BOCA EAST, INC.

| Principal Place of Business | Mailing Address | | |
|---|---|--|--|
| 23050 SANDALFOOT PLAZA DRIVE BOCA RATON FL 33428 | 23060 SANDALFOOT PLAZI BOCA RATON FL 33428 | | |

FILED Mar 29, 1999 8:00 am Secretary of State 03-29-1999 90100 023 ***150.00

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| 23060 SANDALF BOCA RATON F | COOT PLAZA DRIVE FL 33428 | 23060 SANDALFOOT PLAZA D BOCA RATON FL 33428 | ORIVE | | | DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 06/01/1998 | |
|--|---|---|------------------------------|--------------|--------------------------------|---|-----------------|
| | | 2e, Mailing Address | | | | Applied For | - { |
| | ace of Business | 26. Maning Address | | | | 5-0843786 Not Applicable | |
| 21 Suite, Apt. | # etc | Suite, Apt. #, etc. | | | | SQ 75 Additional |] |
| 22 | g | 27 | | <u> </u> | <u></u> | 5. Certificate of Status Desired Fee Required - | _; |
| City & State | 9 | City & State | | | • | 6. Election Campaign Financing S.00 May Be Trust Fund Contribution Added to Fees | ! |
| Zip | Country | Zip Country | | | | This corporation owes the current year intangible | 1 |
| 24 | 25 | 29 30 | | | ···· | Personal Property Tax. Yes No | |
| | 9. Name and Address of Current | Registered Agent | | 2.1 | | 10. Name and Address of New Registered Agent | 1 |
| 001 | DOYEIN DAVID | | | 81 | Name | | |
| 2306 | DSTEIN, DAVID 10 SANDALFOOT PLAZA DRIVE | | | 82 | Street Addres | ss (P.O. Box Number is Not Acceptable) | |
| BOC | A RATON FL 33428 | | | 83 | | | 1 |
| | | | | 84 | City | FL 85 Zip Code | į |
| 11, Pursuant office or d agent. I at | to the provisions of Sections 607.0502 egistered agent, or both, in the State on m familiar with, and accept the obligati | and 607.1508, Florida Statutes, f Florida. Such change was auth ons of, Section 607.0505, Florida | the all orized a Statu | bove by t | named corpor he corporation | ration submits this statement for the purpose of changing its registered n's board of directors. I hereby accept the appointment as registered | ; |
| SIGNATURE | Stoneture, typed or printed name of registered agent | and title if englicable (NOTE: Re | Cestered | Agent | signature required v | when reunstating) DATE . | æ; ; |
| 12. | OFFICERS AND | | 13. | | <u> </u> | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | <u>ĕ</u> ∶ |
| TILE | D | ☐ DELETE | 1.5 111 | ΝE | | · Change Addition | CR2E034 (11/98) |
| NAME . | GOLDSTEIN, DAVID | | 1.2 NA | | | | 졄. |
| STREET ADDRESS | 23060 SANDALFOOT PLAZA DF | RIVE 1.351 | | REET | ADDRESS | | Ж . |
| CITY-ST-ZIP | BOCA RATON FL 33428 | | 1.4 CT | TY-ST | -ZIP | | 另非 |
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| CTTY-ST-ZEP | | | 3.4. CI | NY-ST | -21 | ☐ Change ☐ Addition | 45 |
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| STREET ADDRESS CITY-ST-ZIP | | | | TY-ST | | | |
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| NAME | 52 N | | ME | } | • | | |
| | | REET | ADDRESS | | ! | | |
| CITY-ST-ZIP | | | 5.4 CF | TY-ST | - ZDP | | , , |
| TITLE | DELETE 6.11 | | 6.1 TX | | | Change Addition | |
| NAME | | | 6.2 NA | WE | | | |
| STREET ADDRESS | | | 6.3 ST | REET. | ACORESS | } | 1 |
| CTTY-ST-ZIP | | | | TY-ST | | | ' |
| 4.4. I boroby | codify that the information eupolied wit | h this filing does not qualify for th | A AYA | nitam | on stated in Se | ection 119.07(3)(i). Florida Statutes. I further certify that the information | |

I nereby carmy that the information supplied with first mining does not qualify for the exemption stated in Section 113.07(3)(i), Francia Statutes. That is many 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.