2006 FOR PROFIT CORPORATION

ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT #846346

1. Entity Name CEC ENTERTAINMENT, INC.



FILED May 01, 2006 08:00 Al Secretary of State

Principal Place of Business

4441 W AIRPORT FREEWAY IRVING, TX 75062

Mading Address

4441 W AIRPORT FREEWAY IRVING, TX 75062



04282006

No Cha-P

CR2E034 (11/05)

4. FEI Number 48-0905805 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

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	named entity submits this statement for the p tions of registered agent.	urpose of changing its registered	office or (egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registored egent and title i	f applicable (NOTE, Registered Ag	ent slignatur	e required when reinstating)	DATE
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Financin Trust Fund Contribution.	g 🗆	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS GITY-ST-ZIP	CEO FRANK, RICHARD M. 4923 DELOACHE AVE DALLAS, TX 75220				
TITLE NAME STREET ADDRESS CITY - ST-ZIP	ATVP ODOM, SHERMAN, JR. 3934 BOCA BAY DALLAS, TX			. 2.2 2	05/15/06-80027-014 150.00
TITLE NAME STREET ADDRESS CITY+ST-ZIP	P MAGUSIAK, MICHAEL 2404 NORWALK DR COLLEYVILLE, TX 76034			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NEEB, LOUIS P 6914 HILLPARK DR DALLAS, TX			IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY+ST-ZIP	EVP HUSTON, RICHARD T. 152 SHEPHERDS GLEN HEATH, TX				
TITLE					

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 equired 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.

STREET ADDRESS CITY-S1-ZIP

SIGNATURE: COOM SHERMAN , JR. MUCE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

972 - 258 -8507

04-28-06

Daytime Phone #