

**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F33357

**FILED  
Apr 02, 2004  
Secretary of State**

**Entity Name:** ACTION BINGO SUPPLIES, INC.

**Current Principal Place of Business:**

3600 NW 2ND AVENUE  
BOCA RATON, FL 33431

**New Principal Place of Business:**

**Current Mailing Address:**

3600 NW 2ND AVENUE  
BOCA RATON, FL 33431

**New Mailing Address:**

FEI Number: 59-2118451

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

JOSIAH, CHARLES  
3600 NW 2ND AVE.  
BOCA RATON, FL 33431

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PS ( ) Delete  
Name: JOSIAH, CHARLES R,  
Address: 721 SW 5TH ST  
City-St-Zip: BOCA RATON, FL

Title: TV ( ) Delete  
Name: JOSIAH, PATRICIA A,  
Address: 721 SW 5TH ST  
City-St-Zip: BOCA RATON, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES JOSIAH

PS

04/02/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date