# DOCUMENT# L05000106955

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: GAME TECHNOLOGY LLC

## Current Principal Place of Business:

9737 NW 41 STREET SUITE 790 DORAL, FL 33178

#### **Current Mailing Address:**

9737 NW 41 STREET SUITE 790 DORAL, FL 33178 US

## FEI Number: 20-3726071

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

OLIVARES, LUIS 9737 NW 41 STREET SUITE 790 DORAL, FL 33178 US

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

## Authorized Person(s) Detail :

Autionzed Ferson(S) Detail.			
Title	MGR	Title	MGR
Name	OLIVARES, LUIS E	Name	GALLIMBERTI, DANIEL O
Address	9737 NW 41 STREET SUITE 790	Address	9737 NW 41 STREET SUITE 790
City-State-Zip:	DORAL FL 33178	City-State-Zip:	DORAL FL 33178
Title	MGR	Title	MGR
Name	PAZ, EDUARDO A	Name	GUZMAN, FABIAN R
Address	9737 NW 41 STREET SUITE 790	Address	9737 NW 41 STREET SUITE 790
City-State-Zip:	DORAL FL 33178	City-State-Zip:	DORAL FL 33178
Title	MGR		
Name	RODRIGUEZ, GERARDO		
Address	9737 NW 41 STREET SUITE 790		
City-State-Zip:	DORAL FL 33178		

I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

MANAGER

## SIGNATURE: LUIS OLIVARES

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

Date