

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 11, 2002 8:00 am
Secretary of State

02-11-2002 90098 006 ***150.00

DOCUMENT # 399312

1. Entity Name

FLORIDA "M" CORPORATION

Principal Place of Business

**PARK PLACE & TH BOARDWALK
 ATLANTIC CITY NJ 08401
 US**

Mailing Address

**PARK PLACE & TH BOARDWALK
 ATLANTIC CITY NJ 08401
 US**

2. Principal Place of Business

Suite, Apt. #, etc.

N/A

3. Mailing Address

Suite, Apt. #, etc.

N/A

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

93-0720416

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
 1200 S. PINE ISLAND RD.
 PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name

N/A

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 -Make Check Payable to Department of State-**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **PD** ☒ Delete
 NAME **BOYNTON, PETER**
 STREET ADDRESS **3570 LAS VEGAS BLVD SOUTH**
 CITY-ST-ZIP **LAS VEGAS NV 89109**

TITLE **VP** ☒ Delete
 NAME **RUBINSTEIN, MARC**
 STREET ADDRESS **3570 LAS VEGAS BLVD., SOUTH**
 CITY-ST-ZIP **LAS VEGAS NV**

TITLE **SGC** ☒ Delete
 NAME **RIVERA-SOTO, ROBERTO**
 STREET ADDRESS **3800 HOWARD HUGHES PKWY, SUITE 1600**
 CITY-ST-ZIP **LAS VEGAS NV**

TITLE **AT** ☒ Delete
 NAME **WILSON, BETTY M**
 STREET ADDRESS **3570 LAS VEGAS BLVD SOUTH**
 CITY-ST-ZIP **LAS VEGAS NV 89109**

TITLE **T** ☒ Delete
 NAME **MALAND, TIM**
 STREET ADDRESS **3570 LAS VEGAS BLVD., SOUTH**
 CITY-ST-ZIP **LAS VEGAS NV 89109**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Director/President/Treasurer** ☐ Change ☒ Addition
 NAME **WALLACE R. BARR**
 STREET ADDRESS **Park Place and the Boardwalk**
 CITY-ST-ZIP **Atlantic City, NJ 08401**

TITLE **Secretary** ☐ Change ☒ Addition
 NAME **KIM SINATRA**
 STREET ADDRESS **3930 Howard Hughes Parkway**
 CITY-ST-ZIP **Las Vegas, NV 89109**

TITLE **Assistant Secretary** ☐ Change ☒ Addition
 NAME **BERNARD E. DeLURY, JR.**
 STREET ADDRESS **Park Place and the Boardwalk**
 CITY-ST-ZIP **Atlantic City, NJ 08401**

TITLE **Assistant Secretary** ☐ Change ☒ Addition
 NAME **Mark A. Clayton**
 STREET ADDRESS **3930 Howard Hughes Parkway**
 CITY-ST-ZIP **Las Vegas, NV 89109**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 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 required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

Bernard E. DeLury, Jr., Assistant Secretary

01/09/02 (609) 340-2820

Date

Daytime Phone #

CR2E034 (9/01)