

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 836764

1. Entity Name
FLORIDA GAMING CORPORATION

FILED
Apr 22, 2002 8:00 am
Secretary of State

04-22-2002 90196 010 ***158.75

Principal Place of Business

3500 N.W. 37TH AVENUE
MIAMI FL 33142
US

Mailing Address

3500 N.W. 37TH AVENUE
MIAMI FL 33142
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-1670533

Applied For

Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RICO, JOHN
3500 N.W. 37TH AVENUE
MIAMI FL 33142

Name

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME HOWELL, ROLAND M.
STREET ADDRESS 555 NE 15TH STREET
CITY-ST-ZIP MIAMI FL ☐ Delete

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

TITLE D
NAME GALLOWAY, GEORGE W. DR. J
STREET ADDRESS 140 RIVER COURT PKWY NW
CITY-ST-ZIP ATLANTA GA ☐ Delete

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

TITLE EVPS
NAME COLLETT, BENNETT W JR
STREET ADDRESS 7329 MARSH TERRACE
CITY-ST-ZIP ST LUCIE FL 34986 ☐ Delete

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

TITLE D
NAME HENSLEY, TIMOTHY L
STREET ADDRESS 1302 HAYNES DR.
CITY-ST-ZIP MURFREESBORO TN 37129 ☐ Delete

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

TITLE P
NAME HURD, ROBERT
STREET ADDRESS #7 PARTRIDGE RUN
CITY-ST-ZIP WARREN NJ 70509 ☐ Delete

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

TITLE ☐ Delete
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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/02
Date

(305) 633-6400
Daytime Phone #

CP2E034 (9/01)