


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2005 08:00 AM
Secretary of State

DOCUMENT # 836764 1. Entity Name FLORIDA GAMING CORPORATION	
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Principal Place of Business 3500 N.W. 37TH AVENUE MIAMI, FL 33142 US	Mailing Address 3500 N.W. 37TH AVENUE MIAMI, FL 33142 US
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DO NOT WRITE IN THIS SPACE



02192005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1670533	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent RICO, JOHN 3500 N.W. 37TH AVENUE MIAMI, FL 33142	DO NOT WRITE IN THIS SPACE
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when registering) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOWELL, ROLAND M. 555 NE 15TH STREET MIAMI, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GALLOWAY, GEORGE W. DR. J 1242 OLD BLUE CREEK RD CLEVELAND, GA 30528	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P COLLETT, BENNETT W JR 1750 S KINGS HWY FORT PIERCE, FL 34945	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HADDON, WILLIAM C 196 ATLANTA COUNTRY CLUB DR MARIETTA, GA 30067	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		

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03/05/05-80025-020 158.75

12. 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: W. Bennett Collett Jr **W. Bennett Collett Jr** 2/28/05 (305) 633-6400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #