
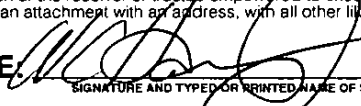


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 27, 2006 8:00 am**  
**Secretary of State**

01-27-2006 90030 041 \*\*\*150.00

<b>DOCUMENT # F05000005925</b> 1. Entity Name <b>DAVE &amp; BUSTER'S MANAGEMENT CORPORATION, INC.</b>					
Principal Place of Business <b>2481 MANANA DRIVE DALLAS, TX 75220</b>			Mailing Address <b>2481 MANANA DRIVE DALLAS, TX 75220</b>		
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 <b>20-1574573</b>	
				5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>CAPITOL CORPORATE SERVICES, INC. 1333 NORTH DUVAL STREET TALLAHASSEE, FL 32303</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>		
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 reinstating)					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PC		TITLE		
NAME	CORRIVEAU, DAVID O		NAME		
STREET ADDRESS	2481 MANANA DRIVE		STREET ADDRESS		
CITY - ST - ZIP	DALLAS, TX 75220		CITY - ST - ZIP		
TITLE	VS		TITLE		
NAME	HAMMETT, W.C. JR.		NAME		
STREET ADDRESS	2481 MANANA DRIVE		STREET ADDRESS		
CITY - ST - ZIP	DALLAS, TX 75220		CITY - ST - ZIP		
TITLE	VC		TITLE		
NAME	CORLEY, JAMES W		NAME		
STREET ADDRESS	2481 MANANA DRIVE		STREET ADDRESS		
CITY - ST - ZIP	DALLAS, TX 75220		CITY - ST - ZIP		
TITLE			TITLE		
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE			TITLE		
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE			TITLE		
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.C. HAMMETT, JR.		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date: 1/17/06		
			Daytime Phone #: 214-357-9586		