FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham **ANNUAL REPORT** Secretary of State 1998 DIVISION OF CORPORATIONS

FILED Feb 05 1998 8:00am Secretary of State

	MENT # F9500 (On, INC.	00019	917 (2)						
Principal Plac	e of Business	Mailing	Address			4 40 0 (10 to 10 t	151 MAINT MAINT EIRIM	10101 1101	1 1841 1841
3799 LAS VEGAS BLVD SOUTH 3799 LAS VEGAS BLVD S				. South					
LAS VEGAS NV 89109 LAS VEGAS NV 89109					DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualified			
						04/20/1995			
2. Principal P	face of Business	2a. Maile	2a. Mailing Address			4. FEI Number		Applied For	
21		26	26			88-0234293			t Applicable
Suite, Apt.	#, etc.	Suite	Suite, Apt. #, etc.			5. Certificate of Status Desired	7 .		dditional
22		27						Fee Re	
City & State	6	<u> </u>	City & State			6. Election Campaign Financing		5.00 Added to	May Be
Zip	Country	28		Country	,	Trust Fund Contribution			
24	25		9 30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
24	9. Name and Address of Curre		Agent	1001		10. Name and Address of New Re		t	
C1	CORPORATION SYSTEM			81	Name		-		
1200 S. PINE ISLAND RD.				82	Street Add	ress (P.O. Box Number is Not Acceptab	viel .		
PLANTATION FL 33324				"	00000700	ress (r.o. box (furrisor is ffor Acceptain	,,,,		
				83					
				84	City		 85	Zip C	:nde
					,		- FL	'	
11. Pursuant office or r agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with an accept the only	02 and 607.15 ເອົາ Florida St ations of, Sec	08, Florida Stalu ich change was tion 607.0505, Fl	tes, the abov authorized by lorida Statute	e-named corp the corpora s.	ooration submits this statement for the p tion's board of directors. I hereby accep	urpose of char of the appointm	iging its ient as i	registered registered
SIGNATURE	Moselli.	are and the depute	able (NO	IF Pagistored Age	or eimeline remi	red when reinstating)	DATE		
12,	Stonylor Types or printed name of legistered agent and title it applicable (N OFFICERS AND DIRECTORS			13.	and and reduce	ADDITIONS/CHANGES TO OFFIC		ECTOR	S IN 12
TITLE	C DELETE			1.1 TITLE				Change	Addition
NAME	LANNI, J T			1.2 NAME					
STREET ADDRESS	3799 LAS VEGAS BLVD SOUTH			1.3 \$TREET	ADDRESS				
CITY-ST-ZIP	LAS VEGAS NW			1.4 CITY - S	:1-2IP				
TITLE	PCOO DELETE		2 1 TITLE				Change	☐ Addition	
NAME	MOON, ROBERT V			2.2 NAME					
STREET ADDRESS	8799 LAS VEGAS BLVD SOU	TH		2.3 STREET	ADDRESS				
CITY-ST-ZIP	LAS VEGAS NV			2. 4 CITY-	ST-ZIP				
TITLE	ST COULD COULT		☐ DELETE	3.1 TITLE			□ (Change	L Addition ∫
NAME	LANGSNER, SCOTT	TU		3.2 NAME					
STREET ADDRESS	3799 LAS VEGAS BLVD SOU LAS VEGAS NV	חזיו		3.3 STREET	- 1				
CITY-ST-ZIP	DAS VEGAS INV		DELETE	3.4. CITY-1	ST-7IP		7	Change	Addition
TITLE	YEMENIDJIAN, ALEX		(/t/t/(t	4 1 TITLE			L) (nanyo	
NAME	3799 LAS VEGAS BLVD SOU	TH		4 2 NAME	Apparee .				
STREET ADDRESS	LAS VEGAS NV	****		4.3 STREET	J				
CITY-ST-ZIP TITLE			DELETE	4.4 CITY - S 5.1 TITLE	11-2IF			hange	Addition
NAME				5.2 NAME			_	-	_
STREET ADDRESS				53 STREET	ADDRESS				ł
CITY-ST-ZIP				54 CITY- 9					
TITLE			DELETE	61 THLE				hange	Addition
NAME				62 NAME					
STREET ADDRESS				63 STREET	ADDRESS				
CITY-ST-ZIP				64 CITY-S	1 - ZIP				

14. 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 annual report or supplemental antique 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 preciever of rustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an appears.

1/28/98

(702) 891-7000