2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2009
Secretary of State

DOCUMENT# H81393

Entity Name: CASINOS AUSTRIA MARITIME CORPORATION

Current Principal Place of Business:

110 EAST BROWARD BLVD
SUITE 500
FT. LAUDERDALE, FL 33301 US

New Principal Place of Business:

Current Mailing Address:

110 EAST BROWARD BLVD
SUITE 500
FT. LAUDERDALE, FL 33301 US

New Mailing Address:

FEI Number: 59-2715677 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KUBIT ESQUIRE, DONALD
ESPIRITO SANTO PLAZA
1395 BRICKELL AVENUE 14TH FLOOR
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: TUCEK, ALEXANDER
Address: 110 EAST BROWARD BLVD
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: STD ( ) Delete
Name: BLOCK, ARNOLD
Address: 110 EAST BROWARD BLVD
City-St-Zip: FT. LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALEXANDER TUCEK MR 02/04/2009

Electronic Signature of Signing Officer or Director Date