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PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J17490

SELF-SERVICE AMUSEMENT CORP.

(0)

FILED May 01 1997 8:00am Secretary of State



| Principal Place | of Business | Principal Place of Business Mailing Address M30 &W. 19TH ST., BAY 480 3330 TAFT ST PEMBROKE PARK FL 33008 HOLLYWOOD FL 33021-4804 US | | | F 1889110 8401 11011 10011 BIGIN BIGIN GIGIN GIGIN GIGIN GIGIN GIGIN GIGIN GIGIN | | | |
|------------------------|---|---|---------------------------------|-----------------------------------|---|----------------------------------|----------------------|--------------------------------|
| | | | | | | | | |
| | | •• | | | 3. Date Incorporated or Qualified 05/29/1986 | 3a. Date of 05/01/1 | | eport |
| 2. Principal Pi | ace of Business | 2a. Mailing Address | | | 4. FEI Number 59-2812182 | | <u> </u> | plied For |
| Suite, Apt. | HAYES STREET | 26 | | | | <u> </u> | | t Applicabl Additional |
| 2 Horas | Lungo de | 27 | | | 5. Certificate of Status Desired | 1 | Fee Re | |
| Ony or Oldic | 7 | City & State | | | 6. Election Campaign Financing \$5.00 May E | | | |
| 3 FC | | 28 | | | Trust Fund Contribution | | Added t | |
| Zip 4 多多 公 | 20 25 Brown O | Z ip 29] | 30 Cour | ıtry | 8. This corporation has liability for i | ntangible tax t ≹Yes □ No | | 199.032, |
| 4 000 | 20 25 Brown O 9, Name and Address of Curren | | 1301 | | 10. Name and Address of New Re | | | |
| GUT | TIERE, MICHAEL | | | 81 Name | M: 1251 | | | |
| 3130 | 8.W. 19TH ST | | ļ | ליט כ) B2 Street Add | TIENE MICHAEL tress (P.O. Bux Number is Not Acceptab | le) | | |
| | BROKE PARK FL 33009 | | 1 | 221 | 7 Hayes St | | | |
| , ' | | | | 83 8 | | | | |
| : -, | | | } | 84 Qiby | | 85 | Zip.C | Oode |
| · · | | | | HOLLY | /ധാർ poration submits this statement for the p | <u> </u> | | ^{⊙ode} 30≥0 |
| 11. Pursuant t | to the provisions of Sections 607.050 egistered/agent, or both, in the State | 2 and 607,1508, Florida Sta of Florida, Such change wa | itutes, the at as authorized | ove-named cor I by the corpora | poration submits this statement for the pation's board of directors. I hereby acception's | urpose of cha at the appointr | nging it: nent as | s registere reaistered |
| agent. I ar | m familia with and accept the obliga | aligns of Section 607.05.05, | Florida Statı, ، | | | u., | | |
| SIGNATURE . | Mudelle | and title if applicable | I | Agent signature requ | 2 | 00/97 | 7 | |
| 12. | OFFICERS AND | | 13. | Agrat, signature tequ | ADDITIONS/CHANGES TO OFFIC | | | S IN 12 |
| TITLE | TSD | DELETE | 1.1 111 | LF | | | Change | Additio |
| NAME | GUTTIERE , THERESE | | 12 NA | ME | | | | |
| STREET ADDRESS | 3330 TAFT ST | | 1.8 ST | REET ADDRESS | | | | |
| CITY-ST-ZIP | HOLLYWOOD FL | | 1.4 CF | Y-ST-ZIP | | | | |
| TITLE | PSD | ☐ DELETE | 2.1 111 | lf. | | | Change | Addition |
| NAME | GUTTIERE, MICHAEL | | 2.2 NA | ME | | | | |
| STREET ADDRESS | 3330 TAFT ST. | | 2.3 ST | REFT ADDRESS | | | | |
| CITY-ST-ZIP | HOLLYWOOD FL | DECEM | | TY - S1 - ZIP | | | 0 | T7 4200 |
| TITLE | | DELETE | 3.1 7(7 | | | ш, | Change | Addilio |
| NAME PTREET ADDRESS | | | 32 NA | | | | | |
| STREET ADDRESS | | | | RELT ADDRESS TY-ST-ZIP | | | | |
| CITY-ST-ZIP | | DELETE | 4 1 117 | | | | Change | Addition |
| NAME | | | 4 2 N | | | | - | |
| STREET ADDRESS | | | | HEFT ADDRESS | | | | |
| CITY-ST-ZIP | | | | ry - ST - 7JP | | | | |
| TITLE | | DELETE | 5.1 111 | | | | Change | Additio |
| NAME | | | 5.2 NA | ME | | | | |
| STREET ADDRESS | | | 5.3 ST | REET ADDRESS | | | | |
| CITY-ST-ZIP | | | 5.4 CI | ry - ST - 7IP | | | | |
| TITLE | | DELETE | 6.1 111 | LF | | | Change | Addition Addition |
| NAME | | | 6.2 NA | ME | | | | |
| STREET ADDRESS | | | | | | | | |
| STREET PUDDIESS | | | 63\$1 | HEET ADDRESS | | | | |

I do 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 annual 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 12 or Block 13 if changed, or on an attachment with an address.