

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2001 8:00 am
Secretary of State

05-15-2001 90084 022 ***150.00

DOCUMENT # P00000050993

1. Entity Name

EAGLE VISIONS GAMING GROUP, INC.

Principal Place of Business

Mailing Address

**300 RACQUET CLUB ROAD
 SUITE 101
 WESTON FL 33326**

**300 RACQUET CLUB ROAD
 SUITE 101
 WESTON FL 33326**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LAZARUS, DAVID M
 C/O DAVID M. LAZARUS, ESQ.
 2255 GLADES ROAD SUITE 422A
 BOCA RATON FL 33431**

Name

BERNARD H. LANGE

Street Address (P.O. Box Number is Not Acceptable)

300 RACQUET CLUB RD #101

City

FT. LAUDERDALE

FL

Zip Code

33326

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

BERNARD H. LANGE

4/27/01

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so ☐ (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PRESIDENT - DIRECTOR** ☐ Delete
 NAME **LEONARD PRESCOTT**
 STREET ADDRESS **13733 THUNDERBIRD CIRCLE**
 CITY-ST-ZIP **SHAKOPEE, MN. 55379**

TITLE ☐ Change ☐ Addition
 NAME ☐ Change ☐ Addition
 STREET ADDRESS ☐ Change ☐ Addition
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **VICE PRES - DIRECTOR** ☐ Delete
 NAME **DAVID LANGE**
 STREET ADDRESS **100 LAKEVIEW DR. #207**
 CITY-ST-ZIP **WESTON, FL 33326**

TITLE ☐ Change ☐ Addition
 NAME ☐ Change ☐ Addition
 STREET ADDRESS ☐ Change ☐ Addition
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **SECY/TREAS - DIRECTOR** ☐ Delete
 NAME **DORIAN LANGE**
 STREET ADDRESS **300 RACQUET CLUB RD.**
 CITY-ST-ZIP **FT. LAUDERDALE, FL. 33326**

TITLE ☐ Change ☐ Addition
 NAME ☐ Change ☐ Addition
 STREET ADDRESS ☐ Change ☐ Addition
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **DIRECTOR** ☐ Delete
 NAME **JAMES GANNARELLI**
 STREET ADDRESS **18916 NORTH 73 DR.**
 CITY-ST-ZIP **GLENDALE AZ 85308**

TITLE ☐ Change ☐ Addition
 NAME ☐ Change ☐ Addition
 STREET ADDRESS ☐ Change ☐ Addition
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Delete
 NAME ☐ Delete
 STREET ADDRESS ☐ Delete
 CITY-ST-ZIP ☐ Delete

TITLE ☐ Change ☐ Addition
 NAME ☐ Change ☐ Addition
 STREET ADDRESS ☐ Change ☐ Addition
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Delete
 NAME ☐ Delete
 STREET ADDRESS ☐ Delete
 CITY-ST-ZIP ☐ Delete

TITLE ☐ Change ☐ Addition
 NAME ☐ Change ☐ Addition
 STREET ADDRESS ☐ Change ☐ Addition
 CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4.30.01

Date

Daytime Phone #

CR2E034 (10/00)