2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P01000064706

1. Entity Name
BRATTTS BINGO INC.

Principal Place of Business	Mailing Address
1269 NW 40TH AVE LAUDERHILL, FL 33313	1269 NW 40TH AVE LAUDERHILL, FL 33313

DO NOT WRITE IN THIS SPACE

03072008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
65-1116255	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

FONTAINE, GALE
2201 NE 44 ST.
LIGHTHOUSE POINT, FL 33064

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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 _____

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00 **After May 1, 2008 Fee will be $550.00**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees

04/10/08--80078--024 150.00

10.	OFFICERS AND DIRECTORS

TITLE	D
NAME	FONTAINE, JOHN
STREET ADDRESS	2201 NE 44TH ST
CITY-ST-ZIP	LIGHTHOUSE PT, FL 33064

TITLE	D
NAME	FONTAINE, GALE
STREET ADDRESS	2201 NE 44TH ST
CITY-ST-ZIP	LIGHTHOUSE PT, FL 33064

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: _Gale Fontaine_   3/26/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #