FILED

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

Sep 10, 2003 8:00 am Secretary of State P02000010644 DOCUMENT # 09-10-2003 90068 030 ***163.75 1. Entity Name GAMER Z INC. Principal Place of Business Mailing Address 12021 KATHLEEN COURT 12021 KATHLEEN COURT CLERMONT FL 34711 CLERMONT FL 34711 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES 4. FEI Number Applied For City & State City & State 61-1405261 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FINN, CHRISTOPHER Street Address (P.O. Box Number is Not Acceptable) 12021 KATHLEEN COURT CLERMONT FL 34711 City Zip Code 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 CHRISTOPHER J. FINN SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Addition Change TITLE ☐ Delete TITL F FINN. CHRISTOPHER NAME NAME 12021 KATHLEEN COURT STREET ADDRESS STREET ADDRESS CLERMONT FL 34711 CITY-ST-ZIP CITY-ST-ZIP John Shannon VICE PREIDENT ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME 61401 5. HWY 97 #7 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BEND OR. 97702 TITLE TREASURER Delete TITLE ☐ Change Addition NAME CUY ROSINGAUM NAME STREET ADDRESS STREET ADDRESS 5111 MARTINIQUE CAlle CITY-ST-ZIP CITY-ST-ZIP PICKENSON TX. 77539 Addition TITLE ☐ Delete TITLE Change Change NAME NAME STREET ADDRESS STREET ADDRESS CiTY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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 employered to examine this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

T Christopusk FINN 8/15/03 SIGNATURE:

with all oth

changed, or on an attachment with an addr

attachment

GAMER Z INC.

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12021 Kathleen Ct. • Clermont Fl. 34711 • Phone (352) 241-8176 • Fax (352) 241-8176 WEB= http://www.gzleagues.com E-Mail=Whoo@gzleagues.com

Friday, August 15, 2003

#CJF-011

Uniform Business Reports Division of Corporations P.O. Box 1500 Tallahassee FL 32302-1500

RE: Late Fees for Filing.

To Whom It May Concern:

Gamer Z Inc. currently received a 60 day notice along with additional filing fees amounting in excess of \$550.00.

This is the first notification we have received concerning the uniformed business report, and would like the above fees waived.

Enclosed is the original filing fee along with any additional costs attached to the Uniformed Business Report.

Should you have any questions please do not hesitate to contact me.

Christopher J. Finn

President Gamer Z Inc.