2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000030783

SLATTERY GO-KARTS & GAMES, INC.



Principal Place of Business

6077 W IRLO BRONSON HWY KISSIMMEE, FL 34747 US

SLATTERY, KENNETH G 6077 WIRLO BRONSON HWY Mailing Address

6077 W IRLO BRONSON HWY KISSIMMEE, FL 34747 US

FILED Jul 19, 2005 8:00 am Secretary of State

07-19-2005 90037 041 ***158.75



DO NOT WRITE IN THIS SPACE	DO	TON C	WRITE	IN THIS	SPACE
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6. Name and Address of Current Registered Agent

CR2E034 (10/03) 07122005 No Chg-P

4. FEI Number 84-1620792

Applied For Not Applicable

\$8.75 Additional Fee Required

5. Certificate of Status Desired

DO	NOT	WRITE
IN	THIS	SPACE

(155)MMEE, FL 34/4/			:	IN '	THIS SPACE
	named entity submits this statement for the ions of registered agent.	purpose of changing its registered	ed office or re	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and titl	te if applicable. (NOTE: Registere	d Agent signature	required when reinstating)	DATE
	LE NOW!!! FEE IS \$550.00 ue by September 7, 2005	Election Campaign Finar Trust Fund Contribution.	ncing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRE	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SLATTERY, KENNETH G 16006 BUXLEY COURT CLERMONT, FL 34711 VP SLATTERY, MARY M 16006 BUXLEY COURT CLERMONT, FL 34711				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SLATTERY, MICHAEL B 16006 BAXLEY COURT CLERMONT, FL 34711			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY+ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				77 F. M	
12. I hereby of indicated	certify that the information supplied with this on this report or supplemental report is true	filing does not qualify for the exec and accurate and that my signal	mption stated ture shall hav	d in Section 119.07(3) ve the same legal effe	(i), Florida Statutes. I further certify that the information ct as if made under oath; that I am an officer or director

of the corporation of 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:	Mary	m. Sla	attery	Moiry	M. Slattery	17/12/0	5 352-241-	026
	SIGNATURE AND TYPED O	R PRINTED NAME OF SIG	NING OFFICER OR DIRECTOR	7	7 /an	9	Daytime Phone #	

ATTACHNENT 7/12/05
P03000030783

Jo Whom Dt May Concern, We did not receive the notice of Intent until around July '05. Enclosed is a check for 158.75 (certificate) per our conversation. Thank you Mary Slattery

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