## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000097534

Entity Name: VEGAS FUN, INC.

FILED Feb 23, 2005 Secretary of State

Current Princip	pal Place of Business:	New Principal Place of Business

1931 SOUTH BISCAYNE DRIVE 160 NORTH MILITARY TRAIL NORTH PORT, FL 34287 WEST PALM BEACH, FL 33409

Current Mailing Address: New Mailing Address:

1931 SOUTH BISCAYNE DRIVE 210 SOUTH FEDERAL HIGHWAY NORTH PORT, FL 34287 SUITE 113 DEERFIELD BEACH, FL 33441

FEI Number: 20-1349872 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FUHRMAN, TRACY M

1931 SOUTH BISCAYNE DRIVE

NORTH PORT, FL 34287

US

CHETKIN, NEIL E

160 NORTH MILITARY TRAIL

WEST PALM BEACH, FL 33409

US

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: NEIL E CHETKIN 02/23/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: FUHRMAN, TRACY M Name: CHETKIN, NEIL E Address: 1931 SOUTH BISCAYNE DRIVE Address: 160 NORTH MILITARY TRAIL

Address: 1931 SOUTH BISCAYNE DRIVE Address: 160 NORTH MILITARY TRAIL
City-St-Zip: NORTH PORT, FL 34287 City-St-Zip: WEST PALM BEACH, FL 33409

 Title:
 ( ) Delete
 Title:
 VP ( ) Change (X) Addition

 Name:
 Name:
 VETTER, JACQUELINE

 Address:
 Address:
 160 NORTH MILITARY TRAIL

 City-St-Zip:
 City-St-Zip:
 WEST PALM BEACH, FL 33409

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NEIL E CHETKIN P 02/23/2005