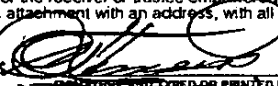


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Sep 02, 2005 8:00 am
Secretary of State

07-25-2005 90095 026 ***163.75

DOCUMENT # P04000132305 1. Entity Name W.T. AMUSEMENT MACHINES, CORP.					
Principal Place of Business 6073 NW 167TH ST STE C-7 MIAMI FL 33015			Mailing Address 6073 NW 167TH ST STE C-7 MIAMI FL 33015		
2. Principal Place of Business 6073 N.W. 167TH STREET		3. Mailing Address 6073 N.W. 167TH STREET			
Suite, Apt. #, etc. E-7		Suite, Apt. #, etc. E-7			
City & State MIAMI, FLORIDA		City & State MIAMI, FLORIDA			
Zip 33015		Country USA		4. FEI Number 20-1653422	
5. Certificate of Status Desired ☒		Applied For Not Applicable			
6. Name and Address of Current Registered Agent ROMERO, EFRAIN 6073 NW 167TH ST STE C-7 MIAMI FL 33015		7. Name and Address of New Registered Agent Name EFRAIN ROMERO Street Address (P.O. Box Number is Not Acceptable) 6073 N.W. 167TH STREET - E-7 City MIAMI - FL - Zip Code 33015			
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 		DATE 7-18-05			
(NOTE: Registered Agent signature required when resigning)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing ☒ \$5.00 May Be Trust Fund Contribution. Added to Fees		
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ROMERO, EFRAIN G. 6073 NW 167TH ST STE C-7 MIAMI FL 33015				
☐ Delete					
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition				
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 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 			DATE 7-18-05 (305) 336-1086		
(PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)					

ATTACHMENT

PO# 000132305

66026829

8-29-05

TO: MADAM GLENDA E. HOOD

SECRETARY OF THE STATE OF FLORIDA

DEAR MADAM :

THE PRESENT LETTER
IS FOR PLEED TO YOU, EXCUSE ME
FOR SENT LATE THE FEE TO FILE
THE ANUAL REPORT, BECAUSE AFTER
I GOT THE HEART SURGERY, (AS YOU CAN
SEE IN PHOTOS), I AM VERY WEAK AND
I HAVE MANY PROBLEMS TO MOVE THE
VIDEO GAMES AMUSEMENT MACHINES FROM
ONE PLACE TO OTHER.

VERY TRULLY YOURS


EFRAIN G. ROMERO

W.T. AMUSEMENT MACHINES

ATTACHMENT
P04000132305
06026828

