## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000150413

FILED Aug 04, 2006 Secretary of State

Entity Nar	me: BLACK N	MASQUE GAMES, INC.					
Current P	rincipal Place	e of Business:	New Princ	New Principal Place of Business:			
	TSDALE SQL PARK, FL 327			3209 CALUMET DRIVE ORLANDO, FL 32810			
Current M	ailing Addre	ss:	New Maili	New Mailing Address:			
269 SCOTTSDALE SQUARE WINTER PARK, FL 32792				3209 CALUMET DRIVE ORLANDO, FL 32810			
FEI Number:	34-2022400	FEI Number Applied For ( )	FEI Number Not App	licable ( )	Certificate of Status Des	ired ( )	
Name and	Address of (	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
SUITE 250 ORLANDO The above	ANGE AVE. 00 ), FL 32801 L named entity e of Florida.	JS submits this statement for th	e purpose of changing	its registered c	office or registered ager	nt, or both,	
01011/1101		nic Signature of Registered A	\gent		Date		
Election Car		03(2)(b), F.S., the corporation did g Trust Fund Contribution(). ETORS:	•		TO OFFICERS AND D	DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ( ROSS, FRANK 269 SCOTTSD WINTER PARK	ALE SQUARE	Title: Name: Address: City-St-Zip:	P (X ROSS, FRANK 3209 CALUME ORLANDO, FL	T DRIVE		
Title: Name: Address: City-St-Zip:	ST ( WEISGERBEF 502 WILLOW LAKE MARY, F	LAKE COURT	Title: Name: Address: City-St-Zip:	( )	) Change()Addition		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: WILLIAM R. WEISGERBER ST 08/04/2006