

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000169841

FILED  
Jan 16, 2008  
Secretary of State

**Entity Name:** LUCKY STARS AMUSEMENT CENTER, INC.

**Current Principal Place of Business:**

2555 S. ATLANTIC BEACH BLVD., UNIT 2006  
DAYTONA BEACH, FL 32118

**New Principal Place of Business:**

**Current Mailing Address:**

5754 MORGAN TAYLOR CIRCLE  
LOUISVILLE, OH 44641

**New Mailing Address:**

**FEI Number:** 20-1979277

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BLOOD, ERNEST  
2555 S. ATLANTIC BEACH BLVD., UNIT 2006  
DAYTONA BEACH, FL 32118 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BLOOD, ERNEST  
Address: 2555 S. ATLANTIC BEACH BLVD., UNIT 2006  
City-St-Zip: DAYTONA BEACH, FL 32118

Title: TS ( ) Delete  
Name: BARTA, TIFFINY  
Address: 5754 MORGAN TAYLOR CIRCLE  
City-St-Zip: LOUISVILLE, OH 44641

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TS (X) Change ( ) Addition  
Name: BARTA, TIM  
Address: 5754 MORGAN TAYLOR CIRCLE  
City-St-Zip: LOUISVILLE, OH 44641

I hereby certify that the information supplied with this filing does not qualify 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:** TIM BARTA

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

TRB

01/16/2008

\_\_\_\_\_  
Date