2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# P05000107865

Entity Name: NICE GAMES, INC.

Current Principal Place of Business:

611 DRUID ROAD
SUITE 403
CLEARWATER, FL 33756 US

New Principal Place of Business:

Current Mailing Address:

611 DRUID ROAD
SUITE 403
CLEARWATER, FL 33756 US

New Mailing Address:

FEI Number: 20-3245984 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FINLEY, FLETCHER & PILCH, LLP
1221 ROGERS STREET
SUITE B
CLEARWATER, FL 33756 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: D, P ( ) Delete
Name: GOEPFERT, HARALD
Address: ASTERNWEG 7A
City-St-Zip: SCHENEFELD, NA D-22869 DE

Title: D,T ( ) Delete
Name: ENGELHARDT-GOEPFERT, KERSTIN
Address: ASTERNWEG 7A
City-St-Zip: SCHENEFELD, NA D-22869 DE

Title: D,S ( ) Delete
Name: LAHMANN, CORNELIA
Address: GRAF ANTON WEG 10
City-St-Zip: HAMBURG, NA D-22459 DE

Title: D ( ) Delete
Name: LETTAU, KATHLEEN
Address: 611 DRUID ROAD, SUITE 403
City-St-Zip: CLEARWATER, FL 33756 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D, P (X) Change ( ) Addition
Name: GOEPFERT, HARALD
Address: INDUSTRIESTRASSE 9
City-St-Zip: GLATTBRUGG, NA CH-8152 CH

Title: D,T (X) Change ( ) Addition
Name: ENGELHARDT-GOEPFERT, KERSTIN
Address: INDUSTRIESTRASSE 9
City-St-Zip: GLATTBRUGG, NA CH-8152 CH

Title: D,S (X) Change ( ) Addition
Name: LAHMANN, CORNELIA
Address: 1799 N. HIGHLAND AVE, UNIT T55
City-St-Zip: CLEARWATER, FL 33755 US

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

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: HARALD GOEPFERT D, P 04/15/2009

Electronic Signature of Signing Officer or Director — Date