2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2008
Secretary of State

DOCUMENT# P07000042566

Entity Name: ACE IN THE HOLE POKER, INC.

Current Principal Place of Business:

4799 COCONUT CREEK PARKWAY
#182
COCONUT CREEK, FL 33063

New Principal Place of Business:

Current Mailing Address:

4799 COCONUT CREEK PARKWAY
#182
COCONUT CREEK, FL 33063

New Mailing Address:

FEI Number: 20-8787980 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TUTTLE, DENNIS
2908 CARAMBOLA CI S
#B403
COCONUT CREEK, FL 33066 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:	PSVT	( ) Delete
Name:	BLUM, JAMIE	
Address:	PO BOX 50373	
City-St-Zip:	LIGHTHOUSE POINT, FL 33074	
Title:	D	( ) Delete
Name:	BLUM, JAMIE	
Address:	PO BOX 50373	
City-St-Zip:	LIGHTHOUSE POINT, FL 33074	
Title:	D	( ) Delete
Name:	TRIPUCKA, CHRIS	
Address:	1250 NW 49 CT	
City-St-Zip:	DEERFIELD BEACH, FL 33064	
Title:	D	( ) Delete
Name:	TUTTLE, DENNIS	
Address:	2809 CARAMBOLA CI S #B403	
City-St-Zip:	COCONUT CREEK, FL 33066	
Title:	D	( ) Delete
Name:	WILLIAMS, STEVE	
Address:	420 NW 47 ST	
City-St-Zip:	DEERFIELD BEACH, FL 33064	
Title:	D	( ) Delete
Name:	GREEN, STAN	
Address:	420 NW 47 ST	
City-St-Zip:	DEERFIELD BEACH, FL 33064	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: JAMIE BLUM P 04/19/2008

Electronic Signature of Signing Officer or Director — Date