2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000027647

Entity Name: LUCKY 7 ARCADE/CASINO, INC.

FILED Apr 28, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2605 TAMIAMI TRAIL

SUITE 6

PORT CHARLOTTE, FL 33952

Current Mailing Address: New Mailing Address:

2605 TAMIAMI TRAIL

SUITE 6

PORT CHARLOTTE, FL 33952

FEI Number: 26-2225601 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

COSENZA, JOHN A CONWAY, WILLIAM D 2605 TAMIAMI TRAIL 2605 TAMIAMI TRAIL

SUITE 6 SUITE 6

PORT CHARLOTTE, FL 33952 US PORT CHARLOTTE, FL 33952 US

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.

III the State of Florida

SIGNATURE: WILLIAM D. CONWAY 04/28/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: I

Name: AUDIA, SANTO Address: 3500 ALTA VISTA

City-St-Zip: STERLING HEIGHTS, MI 48312

Title: D, P

 Name:
 VINEYARD, LYNN T

 Address:
 38415 RIVERSIDE DRIVE

 City-St-Zip:
 CLINTON TOWNSHIP, MI 48036

Title: D,S

Name: GAUDIO, DONNA Address: 40329 LA GRANGE

City-St-Zip: STERLING HEIGHS, MI 48313

Title: [

 Name:
 BAGIARDI, JULIO

 Address:
 1533 FORAND CIRCLE

 City-St-Zip:
 PORT CHARLOTTE, FL 33952

Title: [

Name: AMORE, PHIL
Address: 38540 KINGSBURY
City-St-Zip: LIVONIA, MI 48154

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM D. CONWAY MR. 04/28/2011