

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 27, 2003 8:00 am
Secretary of State

01-27-2003 90374 034 ***150.00

0066519 AT

DOCUMENT # P22937

1. Entity Name
ARISTOCRAT TECHNOLOGIES, INC.



Principal Place of Business
**3300 BIRTCHER DRIVE
LAS VEGAS NV 89118**

Mailing Address
**3300 BIRTCHER DRIVE
LAS VEGAS NV 89118**

2. Principal Place of Business
7230 Amigo Street
Suite, Apt. #, etc.

3. Mailing Address
7230 Amigo Street
Suite, Apt. #, etc.

City & State
Las Vegas, Nevada
Zip
89119
Country
USA

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Las Vegas, Nevada
Zip
89119
Country
USA

4. FEI Number
88-0097390

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JEYARAJ, LIONEL 71 LONGUEVILLE ROAD LANE COVE, NSW 2066	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ISAACS, MICHAEL G 71 LONGUEVILLE ROAD LANE COVE, NEW SOUTH WALES AU 2066	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HARMER, BURGESS 3300 BIRTCHER DRIVE LAS VEGAS NV 89118	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RANDALL, DES 71 LONGUEVILLE RD LANE COVE NEW SOUTH WALES AU 2066	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NEWBURG, MARK 3300 BIRTCHER DRIVE LAS VEGAS NV 89118	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TCFO ROWAN, RONALD 3300 BIRTCHER DRIVE LAS VEGAS NV 89118	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Burgess Harmer* **Burgess Harmer** 1/17/03 702-270-1260

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)

10013117



☐ CHECK HERE IF MAKING CHANGES