

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**FILED**  
**Apr 28, 1999 8:00 am**  
**Secretary of State**

04-28-1999 90010 045 \*\*\*150.00

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P26014**

1. Corporation Name  
**IGT SERVICES, INC.**

Principal Place of Business  
**1111 LINCOLN ROAD  
4TH FLOOR  
MIAMI BEACH FL 33139-9453**

Mailing Address  
**1111 LINCOLN ROAD  
4TH FLOOR  
MIAMI BEACH FL 33139-9453**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**09/13/1989**

4. FEI Number

**13-3501255**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

**21 600 NE 36<sup>th</sup> Street**

Suite, Apt. #, etc.

**22 Miami, FL**

City & State

**23 33137**

Zip

**United States**

Country

2a. Mailing Address

**26 600 NE 36<sup>th</sup> Street**

Suite, Apt. #, etc.

**27 Miami, FL**

City & State

**28 33137**

Zip

**United States**

Country

9. Name and Address of Current Registered Agent

**MECHANIC, ROY  
1111 LINCOLN RD.  
4TH FLOOR  
MIAMI BEACH FL 33139**

10. Name and Address of New Registered Agent

**81 Name Vincent W. Monard**  
**82 Street Address (P.O. Box Number is Not Acceptable) 600 NE 36<sup>th</sup> Street**  
**83 Miami, FL 33137**  
**84 City** **FL** **85 Zip Code**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE **Vincent W. Monard Treasurer**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

**April 16, 1999**

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

**CD  
NAME ROTH, ROBERT M.  
STREET ADDRESS 1111 LINCOLN RD., 4TH FL  
CITY-ST-ZIP MIAMI BEACH FL**

TITLE ☐ DELETE

**P  
NAME ROTH, RICHARD M.  
STREET ADDRESS 1111 LINCOLN RD., 4TH FL  
CITY-ST-ZIP MIAMI BEACH FL**

TITLE ☒ DELETE

**T  
NAME MECHANIC, ROY  
STREET ADDRESS 1111 LINCOLN RD., 4TH FL  
CITY-ST-ZIP MIAMI BEACH FL**

TITLE ☐ DELETE

**NAME  
STREET ADDRESS  
CITY-ST-ZIP**

TITLE ☐ DELETE

**NAME  
STREET ADDRESS  
CITY-ST-ZIP**

TITLE ☐ DELETE

**NAME  
STREET ADDRESS  
CITY-ST-ZIP**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

**1.2 NAME  
1.3 STREET ADDRESS 600 NE 36<sup>th</sup> Street  
1.4 CITY-ST-ZIP Miami, FL 33137**

2.1 TITLE ☒ Change ☐ Addition

**2.2 NAME  
2.3 STREET ADDRESS 600 NE 36<sup>th</sup> Street  
2.4 CITY-ST-ZIP Miami, FL 33137**

3.1 TITLE ☐ Change ☒ Addition

**3.2 NAME MONARD, VINCENT  
3.3 STREET ADDRESS 600 NE 36<sup>th</sup> Street  
3.4 CITY-ST-ZIP Miami, FL 33137**

4.1 TITLE ☐ Change ☐ Addition

**4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP**

5.1 TITLE ☐ Change ☐ Addition

**5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP**

6.1 TITLE ☐ Change ☐ Addition

**6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP**

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with a letter like empowered.

SIGNATURE: **Vincent W. Monard**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/16/99**

Date

**(305) 573-2800**

Daytime Phone #

CR2E034 (1/98)