

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2001 08:00 AM
Secretary of State

DOCUMENT # P26014

1. Entity Name
 IGT SERVICES, INC.

Principal Place of Business 600 NE 36TH STREET MIAMI 33137	FL	Mailing Address 600 NE 36TH STREET MIAMI 33137	US	FL
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2. Principal Place of Business Suite, Apt. #, etc. City & State	3. Mailing Address Suite, Apt. #, etc. City & State
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DO NOT WRITE IN THIS SPACE

Zip	Country	Zip	Country
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4. FEI Number 13-3501255	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MONARD VINCENT W
 600 NE 36TH STREET

 MIAMI FL
 33137

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.

SIGNATURE _____ DATE **04/25/2001**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS	
T MONARD VINCENT 600 NE 36TH STREET MIAMI FL 33137	<input type="checkbox"/> Delete
P ROTH, RICHARD M. 600 NE 36TH STREET MIAMI FL 33137	<input type="checkbox"/> Delete
CD ROTH, ROBERT M. 600 NE 36TH STREET MIAMI FL 33137	<input type="checkbox"/> Delete
 	<input type="checkbox"/> Delete
 	<input type="checkbox"/> Delete
 	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
 	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Vincent Monard T 04/25/2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/00)