FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE

APPROVED AND FILED

95 MAY -1 AM 12:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000030298 (2)

1. Corporate Name
HIGH SEAS GAMES, INC.

Principal Office Address
4691 NORTH UNIVERSITY DRIVE
SUITE 366
CORAL SPRINGS FL 33067

Mailing Address
4691 NORTH UNIVERSITY DRIVE
SUITE 366
CORAL SPRINGS FL 33067

DO NOT WRITE IN THIS SPACE

3. Date Incorporated (or Qualified): 04/20/1993
3a. Date of Last Report: 04/27/1994

2. Principal Address
21
2a. Mailing Address
26

4. FEI Number: 65-0415576 — Applied For / Not Applicable

22 City, Address
27 Suite, Apt #, etc.

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

23 City, State
28

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

24 25 29 30

8. This corporation has filed for changes as under S. 199.037, Florida Statutes. (X) Yes ☐ No

9. Name and Address of Current Registered Agent

GILES, GARY L
181 N.W. 78TH AVENUE
MARGATE FL 33063

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL 85 Zip Code

11. Pursuant to Section 607.0505 and 607.1608, Florida Statutes, the undersigned corporation affirms the statement of the registered agent, properly registered office address, and registered agent's acceptance of the State of Florida. Such change was authorized by the corporation's board of directors. Hereby, accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

Title	Name	Address
D	GILES, TERRY L	9977 WESTVIEW DRIVE, NO. 112, CORAL SPRINGS FL 33067
D	GILES, GARY L	181 N.W. 78TH AVE., MARGATE FL 33063

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS (Attach)

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing, or voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that I am a duly elected officer 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.

SIGNATURE: Gary L. Giles — Gary L. GILES
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-1-95 — (305) 749-3324

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