

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

0188872

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # P93000036495

1. Corporation Name
GAME LATIN INC.

Principal Place of Business

8100 N.W. 29TH STREET
MIAMI FL 33122
US

Mailing Address

C/O KELLEY DRYE & WARREN
201 S BISCAYNE BLVD SUITE 2400
MIAMI FL 33131

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

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9. Name and Address of Current Registered Agent

THE PRENTICE HALL CORPORATION SYSTEM, INC.
1201 HAYES ST.
STE 105
TALLAHASSEE FL 32301

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

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

(NOTE: Registered Agent signature is not required for this filing)

DATE

12. OFFICERS AND DIRECTORS

TITLE D [] DELETE

NAME YAMAZAKI, MASAO
STREET ADDRESS 8100 N.W. 29TH STREET
CITY-STATE-ZIP MIAMI FL 33122

TITLE D [] DELETE

NAME YAOEDA, UCHI
STREET ADDRESS 8100 N.W. 29TH STREET
CITY-STATE-ZIP MIAMI FL 33122

TITLE D [] DELETE

NAME OTA, KOZO
STREET ADDRESS 8100 N.W. 29TH STREET
CITY-STATE-ZIP MIAMI FL 33122

TITLE A [] DELETE

NAME MATSUI, NORIO
STREET ADDRESS 8100 N.W. 29TH STREET
CITY-STATE-ZIP MIAMI FL 33122

TITLE P [] DELETE

NAME KIKUCHI, TERUHIDE
STREET ADDRESS 8100 N.W. 29TH STREET
CITY-STATE-ZIP MIAMI FL 33122

TITLE V [] DELETE

NAME NARWANI, RAMESH K
STREET ADDRESS 8100 N.W. 29TH STREET
CITY-STATE-ZIP MIAMI FL 33122

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE [] Change [] Addition

12 NAME

13 STREET ADDRESS

14 CITY-STATE-ZIP

15 TITLE

16 NAME

17 STREET ADDRESS

18 CITY-STATE-ZIP

19 TITLE

20 NAME

21 STREET ADDRESS

22 CITY-STATE-ZIP

23 TITLE

24 NAME

25 STREET ADDRESS

26 CITY-STATE-ZIP

27 TITLE

28 NAME

29 STREET ADDRESS

30 CITY-STATE-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-STATE-ZIP

35 TITLE

36 NAME

37 STREET ADDRESS

38 CITY-STATE-ZIP

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****150.00 ****150.00

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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 all other like empowered.

SIGNATURE:

Ramesh Narwani
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RAMESH NARWANI

3/9/99

(305) 716-9988

CR2E034 (11/98)

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STATE OF FLORIDA
DIVISION OF CORPORATIONS



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/20/1993

4. FEI Number

65-0411636

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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

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FL

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Zip Code