PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Mar 23, 1999 8:00 am Secretary of State

03-23-1999 90024 047 ***158.75

DOCUMENT # P93000050490 1. Corporation Name

FLORIDA AMUSEMENTS, INC.

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Principal Place	of Business	Mailing Address	<u> </u>	2 4	rove	an dúsic namé anus anus arus arusa i	ineri ab ii lani
		300 SOUTH PINE ISLAND R	OAD ///X	ene,	per -		
SUITE 110		SUITE 110			~ 1	·	
PLANTATION FL 33324 PLANTATION FL 33324		PLANTATION FL 33324	۸ ا	20	to of	E IN THIS SPACE	
		•	To-	tikico	ne y		
		To Marie Address			•	I And	olied For
		2a. Mailing Address	· 10	Tun.	a	Not	Applicable
Suite, Apt.	th etc		— <i>b</i>			\$8.75 A	
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. City & State	, , , , , , , , , , , , , , , , , , , ,	City & State	<u> </u>	00	n D.	\$5.00	May Be
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Zip	Country	Zip	Coun	1	!	it year Intangible	
4	25	29	30	yh //!!	- 0 ,,		□No
	9. Name and Address of Curr	ent Registered Agent		Music.	Duly De	gistered Agent	
	D 1440W 1	•	5 ¥	10 1	lan 1		
	D, MARK J.		. 8	- P	•	e)	
	SOUTH PINE ISLAND ROAD		<u> </u>				
STE			83	·			
PLAN	NTATION FL 33324		84 City			85 Zip C	ode
						FL °°	
office or re	to the provisions of Sections 607.0 egistered agent, or both, in the Sta	te of Florida. Such change was au	ithorized by the compo	corporation submaration's board of	nits this statement for directors. I hereby ac	the purpose of changing its scept the appointment as reg	registered gistered
agent. I a	m familiar with, and accept the obli	igations of, Section 607.0505, Flori	ida Statutés.				
SIGNATURE			Registered Agent signature re			DATE	
12.	Signature, typed or printed name of registered a	AND DIRECTORS	13.			OFFICERS AND DIRECTO	RS IN 12
TITLE {	P	DELETE	1.1 TITLE		<u> </u>	☐ Change	☐ Addition
NAME	ZAND, MARK	···	1.2 NAME				
STREET ADDRESS	300 S PINE ISLAND ROAD,	SUITE 110	1.3 STREET ADDRESS				
CITY-ST-ZIP	PLANTATION FL	30112 113	1.4 City-ST-ZiP				
TITLE	ST	C) DELETE	2.1 TITLE			☐ Change	Addition
NAME	FISCHER, STEVEN		2.2 NAME				
STREET ADDRESS	300 S PINE ISLAND RD., ST	E 110	2.3 STREET ADDRESS				
CITY-ST-ZIP	PLANTATION FL.		2.4 CITY-ST-ZIP	. c	·2^	ا از این استان میشود شد اما و اسخ ا ستا چیاد	
TITLE		☐ DELETE	3.1 TITLE			☐ Change	☐ Addition
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CITY-ST-ZIP	<u>_</u>		3.4. CITY-ST-ZIP				
T/TLE		☐ DELETE	4.1 TITLE	•		☐ Change	Addition
NAME	1		4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				F 1 2 40
TITLE		☐ DELETÉ	5.1 TITLE			☐ Change	Addition
NAME			5.2 NAME				
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CITY-ST-ZIP	<u> </u>	T ATI THE	5.4 CITY-ST-ZIP 6.1 TITLE			☐ Change	☐ Addition
TITLE		☐ DELETE				☐ Gliange	
NAME			6.2 NAME 6.3 STREET ADDRESS				
STREET ADDRESS	1.1.3. 1.1.7.	•	4				
CITY-ST-ZIP	notify that the information arrows -	with this filing do and austifu for	6.4 CITY-ST-ZIP	in Section 110 (7(3)(i) Florida Statut	es I further certify that the in	nformation
indicated officer or Block 12	or this annual report or supplied on this annual report or supplement director of the corporation or the re or Block 13 if changed, or on an all	with this filing does not qualify for ntal annual report is true and accura- accurer or trustee empowered to ex- taginment with an adoptess, with all	rate and that my signate this report as of other like empowered	ature shall have equired by Chap	the same legal effect ter 607, Florida Statu	as if made under oath; that lites; and that my name appe	l am an ears in

SIGNATURE:

SNATUBE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9 959 370 0 357 Daytine Phone # CR2E034 (11/98)