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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Mar 13 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000063667 (8)

| DOCUMENT # P9300063667 (8) INTERNATIONAL GAMBLING SOFTWARE, INC. Principal Place of Business Mailing Address | | | | | | |
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| | | | | ((| BITT BEITH BITHER LIVIN BILLIN BIT | H 1881 1881 |
| 12319 S. OBT 12319 S. OBT SUITE 261 ORLANDO FL 32837 ORLANDO FL 32837 | | | | Date Incorporated or Qualified | | Report |
| <u> </u> | | | | 09/07/1993 | 10/21/1996 | |
| 2. Principal Place of Bus | siness | 2a. Mailing Address | | 4. FEI Number | } | pplied For |
| Sulte, Apt. #, etc. | ···· | Suite, Apt. #, etc. | | 59-3186342 | ¢0.76 | ot Applicable |
| 22 | | 27 | | 5. Certificate of Status Desired | | Additional equired |
| City & State | | City & State | | 6. Election Campaign Financing | | May Be |
| 23 | | 28 | | Trust Fund Contribution | | to Fees |
| Zip | Country | Zip | Country | 8. This corporation has liability for | | |
| 24 | 25 | | 30 | Florida Statutes | Yes V No | |
| | e and Address of Current | Registered Agent | 81 Name O | 10. Name and Address of New F | Registered Agent | |
| 1444 ABBERT ORLANDO FL | 32837 | 2007 4600 57 45 00 1 | 83 Sitted Add 1145 | T PUMPKINSKED | FL 85 Zip | ^{Code} 3 ය දින ් |
| office or registered | soont or both in the State | ef Florida, Such abanda was a | s, the above-hamed con | poration submits this statement for the | purpose of changing i | ns registered |
| office or registered agent. I am familiar SIGNATURE | ed o printed name of registered ager | nt and little if applicable. (NOTE: | Registered Agent signature requi | | 3-9-97 DATE | |
| SIGNATURE Signature 12. | B Jula | nt and little if applicable. (NOTE: D DIRECTORS | Registered Agent signature requi | | DATE FICERS AND DIRECTOR | RS IN 12 |
| SIGNATURE Signature to | of oprinted name of registered agen OFFICERS AND | nt and little if applicable. (NOTE: | Registered Agoril signature requi | red when reinstating) | 3-9-97 DATE | RS IN 12 |
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14. 10 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 algorithment/with an address.

SIGNATURE.