

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 15, 2004 8:00 am
Secretary of State

03-15-2004 90040 024 ***150.00

DOCUMENT # P94000021695 1. Entity Name HECTOR'S CASINO TOURS & TRAVEL, INC.			
Principal Place of Business 4440 NORTH UNIVERSITY DRIVE LAUDERHILL FL 33351 US		Mailing Address 4440 N UNIVERSITY DR LAUDERHILL FL 33351 US	
2. Principal Place of Business 8610 NW 52 COURT		3. Mailing Address P.O. Box 26773	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State LAUDERHILL, FL		City & State TAMARAC, FL	
Zip 33351		Zip 33320	
Country USA		Country USA	
4. FEI Number 65-0476097		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SLEPOY, HECTOR 4440 N UNIVERSITY DR LAUDERHILL FL 33351		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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT SLEPOY, HECTOR 4440 NORTH UNIVERSITY DRIVE LAUDERHILL FL 33351	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT SLEPOY, HECTOR 8610 NW 52 COURT LAUDERHILL, FL 33351
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS SLEPOY, JACKIE 4440 NORTH UNIVERSITY DRIVE LAUDERHILL FL 33351	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS SLEPOY, JACKIE 8610 NW 52 COURT LAUDERHILL, FL 33351
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE Hector Slepy <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		3/11/2004 954-747-9670 <small>Date Daytime Phone #</small>	

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MOORE CR2E034 (11/03)