

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathum
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 AM 7:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000073999 (2)**

1. Corporation Name

BINGO GAMES, INC.

Principal Place of Business

**10406 S.W. 5TH ST.
MIAMI FL 33174**

Mailing Address

**10406 S.W. 5TH ST.
MIAMI FL 33174**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/03/1994

3a. Date of Last Report

N/A

4. FEI Number

65-0526596

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 has liability for intangible tax under S. 199.027

Florida Statutes

☐ Yes

☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SANCHEZ, PLACIDO
10406 S.W. 5TH ST.
MIAMI FL 33174**

81 Name

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

83

84 City

FL

85 Zip Code

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

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

D

NAME

**SANCHEZ, PLACIDO
10406 S.W. 5TH ST.
MIAMI FL 33174**

STREET ADDRESS

CITY, ST, ZIP

14 TITLE

P/S/D

15 NAME

**SANCHEZ, PLACIDO
10406 SW 5 STREET
MIAMI, FL 33174**

16 STREET ADDRESS

17 CITY, ST, ZIP

21 TITLE

V/T/D

22 NAME

**COSTA, MARCELO
10406 SW 5 STREET
MIAMI, FL 33174**

23 STREET ADDRESS

24 CITY, ST, ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY, ST, ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY, ST, ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY, ST, ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(1)(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.

SIGNATURE:

Placido Sanchez
Placido Sanchez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-28-95
Date

(305) 223-5081
Telephone No.