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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS P95000018697 (9) **DOCUMENT #**

G.P. ESTEIN LAS VEGAS CORPORATION

Principal Place of Business	
C/O ESTEIN & ASSOCIATES USA. LTD. 5211 INTERNATIONAL DRIVE ORLANDO FL 32819	

Mailing Address

C/O ESTEIN & ASSOCIATES USA. LTD. 5211 INTERNATIONAL DRIVE ORLANDO FL 32819



					03/06/1995			
2. Principal Place of Business 2a. Mailing A			Address		4. FEI Number 594308673			Applied For
<u> </u>					5753000 13	·····		Not Applicable
2		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State		City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip []	Country 25	7 _{(P}	Gount 30	ry	8. This corporation has liability for Florida Statutes	intangible ta	nx under s	199.032,
	9. Name and Address of Current I	1			10. Name and Address of New I		Agent	
			8	1 Name				
LEWIS, VEGOSEN & ROSENBACH, P.A.				2	July /B.O. Boy Number is Not Assertal	h le\		
	AN VEGOSEN, ESQUIRE		8	≤ Street Ad	ddress (P.O. Box Number is Not Acceptal	uie)		
	LOOR, 500 SOUTH AUSTRALIAN	AVENUE	8	3			•	
	PALM BEACH FL 33401		_					·
			8	4 Oity		FL	85 Zi	p Code
BIGNATURE	i, and accept the obligations of, Section By a rection protest rand of Agreed agent as	607.0505, Florida Statute	5		oard of directors. Thereby accept the app	DATE	registered	ragent. ram
2.	OFFICERS AND D	DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTO	ORS IN 12
TLE	D	□ DELFTE	1. 1 7(1).	-			Change	Addit:on
AME	ESTEIN, LOTHER		1.2 NAME					
FREET ADDRESS	5211 INTERNATIONAL DRIVE		1.3 STRE	ET ADDRESS				
ITY - ST - ZIP	ORLANDO FL 32819		1.4 CHY	ST- ZIP				
TLE		Defete	2 1 TITLE				Change	Addition
AME			2.2 NAME					
TREET ADDRESS			2.3.5TRE	ET ADDRESS				
TY-ST-ZIP		FT CF Ctc	2 4 CiTY-		V-9.1			
TLE		DELETE	3 1 TILE	ľ			Change	Addition
AME			3.2 NAME					
TREET ADDRESS				ET ADORESS				
TY-ST-7IP TLE		☐ DELETE	3 4 CIFY -			·	7 (6	F7 A444
AME		C Bereit	4.2 NAME			L.] Change	Addition
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TY - ST - ZIP			4.4 CITY -					
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AME			5 2 NAME			L	_ 0.10.190	
REET ADDRESS				T ADDRESS				
TY-ST-ZIP			5.4 CHY-	į.				
ILE		DELETE	6 1 hith			r	7 Change	Addition
MÉ		-	6.2 NAME			L.		
REET ADDRESS			1	T ADDRESS				
ITY-ST-ZIP			6 4 CITY -					
oath; that I	ine information indicaled on this action:	eport or supplemental ann on or the receiver or truste	ished and doo ual report is tr elenipowered	es not qualify	y for the exemption stated in Section 119 trate and that my signature shall have the this report as required by Chapter 607, Fl	camo logal /	affaat aa if	prodo vodos

appears in Block 12 or Block 13 if changed or on an attachment with an address SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER SIGNATURE: