

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 04 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P96000003793 (2)

1. Corporation Name
BINGO ENTERPRISES INC.



Principal Place of Business

Mailing Address

104 CRANDON BLVD.
315
KEY BISCAYNE FL 33149
US

104 CRANDON BLVD.
315
KEY BISCAYNE FL 33149
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/11/1996

4. FEI Number

65-0634035

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 104 CRANDON BLVD

Suite, Apt. #, etc.

22 303

City & State

23 KEY BISCAYNE FL

Zip

24 33149

Country

25 DADE

2a. Mailing Address

26 104 CRANDON BLVD

Suite, Apt. #, etc.

27 303

City & State

28 KEY BISCAYNE FL

Zip

29 33149

Country

30 DADE

9. Name and Address of Current Registered Agent

KASINSKY, ROBERTO
104 CRANDON BLVD.
STE. 315
KEY BISCAYNE FL 33149

10. Name and Address of New Registered Agent

81 Name

ROBERTO KASINSKY

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

104 CRANDON BLVD

83

SUITE 303

84

City KEY BISCAYNE FL

85 Zip Code

33149

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

NO CHANGE JUST ADDRESS. RE.

1/29/98

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

D
NAME KASINSKY, ROBERTO
STREET ADDRESS 104 CRANDON BLVD., STE. 315
CITY-ST-ZIP KEY BISCAYNE FL

TITLE ☐ DELETE

P
NAME HOLMQUIST, MICHAEL
STREET ADDRESS 104 CRANDON BLVD. STE. 315
CITY-ST-ZIP KEY BISCAYNE FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

DIRECTOR
ROBERTO KASINSKY
104 CRANDON BLVD Suite 303
KEY Biscayne FL 33149

☒ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

P
MICHAEL HOLMQUIST
104 CRANDON BLVD Suite 303
KEY Biscayne FL 33149

☒ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. 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 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

1/23/98

CR2E034 (10/97)