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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000018079 (9)

BUDDHA BINGO, INC.

Principal Pl	ace of t	Business
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CITY-ST-ZIP

Mailing Address

## FILED Apr 28 1998 8:00am Secretary of State



4410 WEST 16TH AVENUE C/O DAVID BEALS HIALEAH FL 33012 1000 NW 140TH STREET DO NOT WRITE IN THIS SPACE MIAMI FL 33168 3. Date Incorporated or Qualified 02/27/1996 Principal Place of Business 2a. Mailing Address Applied For 21 Not Applicable 26 65-0647966 Sulte, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Ζip Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. ☐ No 25 29 30 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent BEALS, DONALD F 1080 N.W. 140TH ST. Street Address (P.O. Box Number is Not Acceptable) 82 **MIAMI FL 33168** 83 84 City 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 Signature, typed or printed name of eigestored agent and little if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change ☐ Addition TITLE 1.1 TITLE **BEALS, DONALD F** NAME 1.2 NAME STREET ADDRESS 1080 N.W. 140TH ST. 1.3 STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33168** 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIF 2. 4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 3.1 THILE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change 5.1 TITLE Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADORESS 6.3 STREET ADDRESS

14. Thereby 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 prock 13 if changed, or on an attachment with an address.

6.4 CITY-ST-ZIP

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