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

**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P96000076501 (1)

**ELYSIUM GAME COMPANY** 

## **FILED** May 07 1998 8:00am Secretary of State



Sulte, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  5. Certificate of Status Desired Fee Require	
PORT CHARLOTTE FL 33952  PORT CHARLOTTE FL 33952  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  09/13/1996  2. Principal Place of Business 28. Mailing Address 4. FEI Number Applied Sulle, Apt. #, etc.  Sulle, Apt. #, etc.  5. Certificate of Status Desired Fee Require	For
DO NOT WRITE IN THIS SPACE   3. Date Incorporated or Qualified   09/13/1996   2. Principal Place of Business   2a. Mailing Address   4. FEI Number   Applied   Not Ap	For
3. Date Incorporated or Qualified   09/13/1996   2. Principal Place of Business   2a. Mailing Address   4. FEI Number   Applied   Not Ap	For
2. Principal Place of Business       2a. Mailing Address       4. FEI Number       Applied         21 1850 S Paulon Drive       26       Rot Ap       Not Ap         Sulte, Apt. #, etc.       Suite, Apt. #, etc.       5. Certificate of Status Desired       \$8.75 Addit         22 20 2       27       Fee Require	For
2. Principal Place of Business       2a. Mailing Address       4. FEI Number       Applied         21 1850 S Paulon Drive       26       Rot Ap       Not Ap         Sulte, Apt. #, etc.       Suite, Apt. #, etc.       5. Certificate of Status Desired       \$8.75 Addit         22 20 2       27       Fee Require	For
Sulle, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  5. Certificate of Status Desired Fee Regular	
22 20 2 27 5. Certificate of Status Desired Fee Require	olicable
22 27 Fee Require	onal
	d
City & State  City & State  City & State  6. Election Campaign Financing  Trust Fund Contribution  Added to Fe	
6. This colporation owes or has pard the current year intangit	ole
24 3 3 1 25 4 29 30 Personal Property Tax due June 30. Yes X No  8. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent	
KADERA, DENNIS 81 Name	
2204 ELVOAM BOULEVADD	
PORT CHARLOTTE FL 33952  82 Street Address (P.O. Box Number is Not Acceptable)	
63	
84 City 85 7ip Code	-
84 City FL 85 Zip Code	
14 Duraway to the provisions of Continue CO7 OF CO and CO7 4F CO Clarida On the characteristics of Continue CO7 OF CO Clarida On the characteristics of Continue CO7 OF CO	stered
office or registered agent, or both, in the State of Forda. 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 objection of, Section 607.0505, Florida Statutes.	tered
SIGNATURE Techn Dennis Rayler, Princeton 412496	
Signature typed or prezed current ling stored agent and stilled agent scale (NOTE: Registered Agent signature required when reinstating)  DATE	
12. OFFICERS AND DIRECTORS IN ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TITLE P DELETE 1.1 TITLE	
	Addition
NAME KACLENA, DENNIS  STREET ADDRESS  \$324 ELKCOM BLVD  1.2 NAME  1.2 NAME  KARGRA, DENNIS  1.3 STREET ADDRESS  33.24 ELKCOM BLVD	
#### ###############################	Į
	Addition
NAME 22 NAME	,,,,,,,,,,
STREET ADDRESS 2.3 STREET ADDRESS	
CITY-ST-ZIP 2. 4 CITY-ST-ZIP	
	Addition
NAME 3.2 NAME	l
STREET ADDRESS 3.3 STREET ADDRESS	
CITY-ST-ZIP 3.4 CITY-S1-ZIP	
TITLE DELETE 4.1 TITLE Change	Addition
NAME 4.2 NAME	
STREET ADDRESS 4.3 STREET ADDRESS	j
CITY-ST-ZIP 44 CITY-S1-ZIP	
_ · _	Addition
NAME 52 NAME	
STREET ADDRESS 5.3 STHEET ADDRESS	
CITY-ST-ZIP 5.4 CITY-ST-ZIP	
	Addition
NAME 6.2 NAME	
STREET ADDRESS 6.3 STREET ADDRESS	
CITY-ST-ZIP 64 CITY-ST-ZIP 64 CITY-ST-ZIP 64 CITY-ST-ZIP 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 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 supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes.	natio-

officer or director of the corporation supplied with this tiling does not qualify for the exemption stated in Section 119.07(3)(), Florida Statutes. Further certify that the informatic indicated on this annual report or suppliemental 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 of the receiver or trusted 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.

60126/98