DOCUMENT # P9600076501 1. Entity Name ELYSIUM GAME COMPANY						May 10, 2001 8:00 am Secretary of State 05-10-2001 90181 012 ***150.00				
Principal Place of Business 3324 ELKCAM BLVD. PORT CHARLOTTE FL 33952 JS		Mailing Address 3324 ELKCAM BOULEVARD PORT CHARLOTTE FL 33952			กกกระสานิ					
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE I	N THIS SPACE			
City & State		City & State		4.	4. FEI Number 65-0706954 Applied For Not Applicate				le	
Zip	Country	Zip	Country				Fee Re	•		
	6. Name and Address of Curren	t Registered Agent	Name		Name and A	ddress of New Regi	stered Agent-		-	
KADERA, DENNIS 3324 ELKCAM BOULEVARD PORT CHARLOTTE FL 33952					Box Number i	s Not Acceptable)		-	_	
			City				FL Zip	Code	$\frac{1}{2}$	
9. This corporation is eligible to satisfy its Intangib Tax filing requirement and elects to do so. (See criteria on back)		After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of Sta		\$550.00 Int of State	Trust	on Campaign Financ Fund Contribution.	Ĭ 🗆 👗	5.00 May Be dded to Fees		
11.	OFFICERS AND		12.	A	DDITIONS/CH	IANGES TO OFFICE			ء ا	
ITLE HAME STREET ADDRESS SITY-ST-ZIP	KADERA, DENNIS 3324 ELKCOM BLVD PORT CHARLOTTE FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Cha	nge 🗌 Addition	E024 /10/00	
ITLE NAME Street address Sity-St-Zip		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Cha	nge Addition	2	
ITLE IAME STREET ADORESS SITY-ST-ZIP	The Name of the State Asses . See	Oelete - The Control of the Control	TITLE NAME STREET ADDRESS CITY-ST-ZIP			,	· Char	nge 🔲 Addition .	7	
ITLE IAME TREET ADDRESS ITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Char	nge 🗌 Addition		
ITLE Ame Treet address ITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Char	nge 🔲 Addition	1	
ITLE Ame Treet address ITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Char	nge		
3. I hereby of indicated	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee emp	s true and accurate and that my	ne exemption sta	hava tha cama	Jacob officet or	if made under eeth.	that I am an aff			

2001 UNIFORM BUSINESS REPORT (UBR)