

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000095753

Entity Name: R & R GAMES, INC.

FILED
Mar 01, 2007
Secretary of State

Current Principal Place of Business:

3903 W EL PRADO BLVD
TAMPA, FL 33629 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 130195
TAMPA, FL 33681195 US

New Mailing Address:

PO BOX 130195
TAMPA, FL 33681 US

FEI Number: 59-3412786

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIOLORENZO, FRANK R FRANK D
3903 W EL PRADO BLVD
TAMPA, FL 33629 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: DIOLORENZO, FRANK R
Address: 3903 W EL PRADO BLVD
City-St-Zip: TAMPA, FL 33629

Title: D () Delete
Name: MILLER, EDWARD D
Address: 4001 NW 97 AVE STE 102
City-St-Zip: MIAMI, FL 33178

Title: SV () Delete
Name: MERRILL, STACEY A
Address: 3903 W EL PRADO BLVD
City-St-Zip: TAMPA, FL 33629

Title: D () Delete
Name: DAVID, MERRILL F MD
Address: 130 OCEAN HOUSE RD
City-St-Zip: CAPE ELIZABETH, ME 04107

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRANK DIOLORENZO

PRES

03/01/2007

Electronic Signature of Signing Officer or Director

Date