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 # P9700043280 (1)

GAMES WOMEN PLAY, INC.

Principal Place o			ng Address					
1551 FORUM PLACE SUITE 300A 1551 FORUM PLACE SU WEST PALM BEACH FL 33401 WEST PALM BEACH FL						DO NOT WRITE ALTHOUGH		
						DO NOT WRITE IN THI: 3. Date Incorporated or Qualified	S SPACE	
						05/15/1997		
2. Principal Plac	e of Business	2a, Mailing Address				4. FEI Number	Applied For	
:1		26	26		65-0753808	Not Applicabl		
Suite, Apt. #.	etc.	27 S	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		28	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 4	Country 25	Z 29	Zip Country			This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
	g. Name and Address of Cu	rrent Register	red Agent	ТТ	· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Registere	d Agent	
WES	F PALM BEACH FL 33401				83			
				ļ	84 City	F	85 Zip Code	
11. Pursuant to to office or regingent I am to SIGNATURE	the provisions of Sections 607 istered agent, or both, in the S lamiliar with, and accept the o	.0502 and 607 itate of Florida bligations of, S	.1508, Florida Statu Such change was Section 607.0505, F	ites, the ab authorized lorida Statu	ove-named co by the corpor utes.	proration submits this statement for the purpose ation's board of directors. I hereby accept the ap	of changing its registered pointment as registered	
Sig	nature, typed or printed name of tegistere				Agent signature req	ured when rainstating) DATE		
12	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	D DECEMBER OF THE PARTY OF THE		☐ DEFEAE	1.1 TIT	\ \ \		Change Addition	
EMA	BERNSTEIN, ROBIN 1551 FORUM PLACE SUI	TE OOOA		1.2 NA				
STREET ADDRESS	WEST PALM BEACH FL 3				REET ADDRESS			
CITY - ST - ZIP	DELETE				Y-ST-ZIP		Change I Addition	
ITLE			□ DECE/E	2.1 TIV			Change Addition	
MME				2.2 NA	· 1			
STREET ADDRESS					REET ADORESS			
CITY-ST-ZIP			DELETE	2 4 CIT	Y-ST-ZIP		Change Addition	
			FT DECEIE				TT PURLIÈR TT VOCITION	
IAME				3.2 NA	Vit j			

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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 supplied 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

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS 5.4 City-St-Zip

6.3 STREET ADORESS

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

4.1 TITLE

4.2 NAME

5.1 THTLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADORESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

TITLE NAME

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16k & Ben

DELETE

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4/15/98

Davino Phone 6 6

Change

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FILED

Apr 21 1998 8:00am

Secretary of State

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Addition

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