

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 22, 1999 8:00 am  
Secretary of State

04-22-1999 90082 017 \*\*\*150.00

DOCUMENT # P98000077293

1. Corporation Name  
VEGAS SPORTS, INC.



Principal Place of Business  
10265 GANDY BLVD.  
SUITE 1614  
ST. PETERSBURG FL 33702

Mailing Address  
10265 GANDY BLVD.  
SUITE 1614  
ST. PETERSBURG FL 33702

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
09/08/1998

4. FEI Number  
59-353236

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business  
21 14765 Seminole Tr  
Suite, Apt. #, etc.  
22  
City & State  
23 Seminole FL  
Zip  
24 33776 Country  
25 Pinellas

2a. Mailing Address  
26 14765 Seminole Tr  
Suite, Apt. #, etc.  
27  
City & State  
28 Seminole  
Zip  
29 33776 Country  
30 Pinellas

9. Name and Address of Current Registered Agent

VILLANI, SERGE P  
10265 GANDY BLVD.  
SUITE 1614  
ST. PETERSBURG FL 33702

10. Name and Address of New Registered Agent

81 Name  
Claudia E. Reyes  
82 Street Address (P.O. Box Number is Not Acceptable)  
14765 Seminole Tr  
83  
84 City  
Seminole FL 85 Zip Code  
33776

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 registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/14/99

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
VPD	VILLANI, SERGE P	10265 GANDY BLVD., SUITE 1614	ST. PETERSBURG FL 33702	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
Vice President	Claudia E. Reyes	14765 Seminole Tr	Seminole, FL 33776	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 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 Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/14/99 727-439-3449

CRZE034 (11/98)

0405275