

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10/2



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

FILED

00 JUN 22 AM 9:31

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P99000016530

1. Corporation Name

SoftNetGaming, Inc.

2. Principal Office Address

3. Mailing Office Address

11601 Biscayne Blvd. 11601 Biscayne Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 101

Suite 101

City & State

City & State

Miami, FL

Miami, FL

Zip

Country

Zip

Country

33181

U.S.A.

33181

U.S.A.

4. Date Incorporated or Qualified
To Do Business in Florida

2-19-99

5. FEI Number

65-0898696

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Mark Anton

Street Address (P.O. Box Number is Not Acceptable)

11601 Biscayne Blvd.

Suite, Apt. #, Etc.

Suite 101

City

Miami

State

FL

Zip Code

33181

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date June 16, 2000

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| Titles | Name of Officers and/or Directors | Street Address of Each Officer and/or Director | City / State / Zip |
|--------|--------------------------------------|---|--------------------|
| P | Leonard Bierstein | 11601 Biscayne Blvd. | Miami, FL 33181 |
| V | Mark Anton | 11601 Biscayne Blvd. | Miami, FL 33181 |
| S/T | Sherri E. Paisley | 11601 Biscayne Blvd. | Miami, FL 33181 |
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10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mark Anton

June 16, 2000

Date

Daytime Phone #

981-5516

V.P. of Operations

(305)

CF2E081 (9/99)



2012

Attachment
P99000016530

April 12, 2000

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Uniform Business Report for SoftNetGaming, Inc.

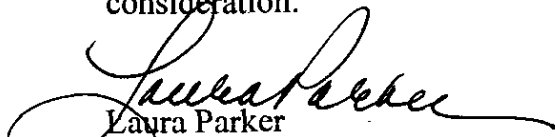
Dear Sir or Madam:

Enclosed you will find a Corporation Reinstatement form for the above-captioned corporation together with a check in the amount of \$158.75.

When I called your office about having not received the 2000 Uniform Business Report form, I was instructed to enclose a check representing the \$150.00 filing fee with a written request that you kindly waive the reinstatement fee.

The additional \$8.75 is for a Certificate of Status.

I understand that this is a one-time waiver and sincerely appreciate your consideration.


Laura Parker
Controller