

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2008 08:00 A
Secretary of State

DOCUMENT # S22204 1. Entity Name B.C.W. GAMES UNLIMITD, INC.	
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Principal Place of Business C/O WILLIAM WAHL 4420 S.W. 93RD AVE. DAVIE, FL 33328	Mailing Address C/O WILLIAM WAHL 4420 S.W. 93RD AVE. DAVIE, FL 33328
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DO NOT WRITE IN THIS SPACE



01042008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0238120	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**WAHL, WILLIAM
4420 SW 93 AVE.
DAVIE, FL 33328**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BECKER, WERNER JACK 8990 S W 8TH ST PLANTATION, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CHILDS, ROBERT 724 S W 14TH CT FT LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD WAHL, WILLIAM 4420 S W 93RD AVE DAVIE, FL
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 the Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: William Wahl **4420 S. W. 93rd AVE.
DAVIE, FL 33328** **1-4-08** **9544758924**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #