# 2017 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT DOCUMENT# F15000000845

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Entity Name: GALAXY GAMING, INC.

#### **Current Principal Place of Business:**

6767 SPENCER STREET LAS VEGAS, NV 89119

## **Current Mailing Address:**

6767 SPENCER STREET LAS VEGAS, NV 89119 US

# FEI Number: 20-8143439

### Name and Address of Current Registered Agent:

INCORP SERVICES, INC. 17888 67TH COURT NORTH LOXAHATCHEE, FL 33470 US

Date

FILED

Certificate of Status Desired: No

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

#### **Officer/Director Detail :**

Title	CHAIRMAN	Title	DIRECTOR
Name	LIPPARELLI, MARK	Name	SAUCIER, ROBERT
Address	6767 SPENCER STREET	Address	6767 SPENCER STREET
City-State-Zip:	LAS VEGAS NV 89119	City-State-Zip:	LAS VEGAS NV 89119
Title	DIRECTOR	Title	DIRECTOR
Name	DESROSIERS, NORM	Name	ZENDER, WILLIAM
Address	6767 SPENCER STREET	Address	6767 SPENCER STREET
City-State-Zip:	LAS VEGAS NV 89119	City-State-Zip:	LAS VEGAS NV 89119
Title	DIRECTOR	Title	CEO, PRESIDENT
Name	WATERS, BRYAN	Name	CRAVENS, TODD P
Address	6767 SPENCER STREET	Address	6767 SPENCER STREET
City-State-Zip:	LAS VEGAS NV 89119	City-State-Zip:	LAS VEGAS NV 89119
Title	CFO, SECRETARY, TREASURER		
Name	HAGERTY, HARRY C III		

City-State-Zip: LAS VEGAS NV 89119

I hereby 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 all other like empowered.

SIGNATURE: TODD P CRAVENS

CEO, PRESIDENT

10/27/2017

Electronic Signature of Signing Officer/Director Detail

Date