UNIFORM COMMERCIAL CODE—FINANCING STATEMENT CHANGE—FORM N-UCC-2

This STATEMENT is presented for filing pursuant to the Nevada Uniform Commercial Code

IMPORTANT: Read instructions on back before filling out form.	Receip	ot No	
1. File No. of Orig. Financing Statement 0426666-BK1197PG3695 11/19/97	1B. Date of Orig. Financing Statement 11/19/97	1C. Place of Filing Orig. Financing Statement Douglas, Nevada	
2. DEBTOR (ONE NAME ONLY) D LEGAL BUSINESS NAME Wimar Tahoe Corp. D INDIVIDUAL (LAST NAME FIRST)		2A. SOCIAL SECURITY OR 8748	FEDERAL TAX NO.
2B MARLING ADDRESS 50 Hwy 50	2C. CITY, STATE Statelin	NV	2D. ZIP CODE 89449
3. ADDITIONAL DEBIOR (If Any) (ONE NAME ONLY) LEGAL BUSINESS NAME NDIVIDUAL (LAST NAME FIRST) dba/ Lake Tahoe Horizon	Casino Resort	3A. SOCIAL SECURITY OR	FEDERAL TAX NO.
3B. MAÎLING ADDRESS	3C. CITY, STATE	/ /	3D. ZIP CODE
4. ADDITIONAL DEBTOR(S) ON ATTACHED SHEET			
5. SECURED PARTY		5A. SOCIAL SECURITY NO. F BANK TRANSIT AND A.B.A. N	
NAME CDS Gaming MAILINGADDRESS 3300 Birtcher Drive			o.
city Las Vegas STATE NV		88-0323265	\
	ZIP CODE 89118		
6. ASSIGNEE OF SECURED PARTY (If Any) NAME		6A. SOCIAL SECURITY NO. F BANK TRANSIT AND A.B.A. N	
MAILING ADDRESS			
	/	\	
7. CONTINUATION—The criginal Financing Statement between the force	ZIP CODE		
A. CONTINUATION—The original Financing Statement between the foregis crops or timber fixtures, or oil, gas or minerals check here and in or from which to be extracted in Item 8 below. If crops or fixtures, expiration date.	insert description of real property on which also insert name of record owner of real e	growing or to be grown or to which a state. Effective only if submitted wi	affixed or to be affixed thin 6 months prior to
B. RELEASE—From the collateral described in the Financing Statement below. Release does not terminate debt.	t bearing the file number shown above, the	Secured Party releases the collater	al described in Item 8
C. ASSIGNMENT—The Secured Party certifies that the Secured Party has Statement bearing the file number shown above in the collateral description.	as assigned to the Assignee above named. a cribed in Item 8 below.	ll or part of the Secured Party's right	s under the Financing
D. X TERMINATION—The Secured Party certifies that the Secured Party no E. AMENDMENT—The Financing Statement bearing the file number show made in Item 8 below. (Signature of Debtor(s) and Secured Party(ie	vn above is amended as set forth in Item 8 b		
(Date)	-22 <u>18</u> 98 10.	This Space for Use of Filing Offi Number and filing Officer)	cer: (Date, Time, File
BySIGNATURE(S) OF DEBTOR(S) TYPE NAME(S)	(TITLE)	(jasi	ISTED BY DATA L RECORDS OF S CO NE VADA
SIGNATURE(S) OF SECURED PARTY(IES) David Lucchese, VP of Sales	(TITLE)	'98 JUL 28	8 A9:04
TYPE NAME(S)		70 00L 2U	110 07
Return Copy to: Bruce Benson c/o CDS NAME 3300 Birtcher Drive ADDRESS Las Vegas, NV 89118 CITY, STATE AND ZIP	Trust Account Number (If Applicable)	LIND A REC 45463 PAI	SLATER CORDER DEPUT
l '	,—— I ·	BK0798PG58	7
UNIFORM COMMERCIAL CODE-FORM N-UCC-2 (Rev. 12-93) Approved by the	Nevada Secratary Of State	DV 0 1 2 0 1 0 2 0) / I