

Edgar Filing: LATIN AMERICAN CASINOS INC - Form 5

LATIN AMERICAN CASINOS INC  
 Form 5  
 February 15, 2001

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 FORM 5  
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[ ] CHECK THIS BOX IF NO LONGER  
 SUBJECT TO SECTION 16. FORM 4 OR FORM  
 5 OBLIGATIONS MAY CONTINUE. SEE  
 INSTRUCTION 1(b).

[ ] FORM 3 HOLDINGS REPORTED

[X] FORM 4 TRANSACTIONS REPORTED  
 (Print or Type Responses)

U.S. SECURITIES AND EXCHANGE COMMISSION  
 WASHINGTON, D.C. 20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a)  
 Holding Company Act of 1935 or Section 30(f) of the Investment Company A

|   |         |          |  |   |            |
|---|---------|----------|--|---|------------|
| 1. Name and Address of Reporting Person*(1) |         |          | 2. Issuer Name and Ticker or Trading Symbol                      |   | 6. R       |
| Caballero, Jose                             |         |          | Latin American Casinos, Inc., "LACI"                             |   | P          |
| (Last)                                      | (First) | (Middle) | 3. IRS or Social Security Number of Reporting Person (Voluntary) | 4. Statement for Month/Year of Reporting  | [X]<br>[ ] |
| 2000 NE 164th Street                        |         |          |  | 2000                                      |            |
| (Street)                                    |         |          |  |   |            |
| North Miami Beach, Florida 33162            |         |          | 5. If Amendment, Date of Original (Month/Year)                   | 7. Individual or Joint (Check Applicable) |            |
| (City)                                      | (State) | (Zip)    |  | [X] Form filed<br>[ ] Form filed          |            |

TABLE I - NON-DERIVATIVE SECURITIES ACQUIRED, DISPOSED OF, OR BENEFICIA

| 1. Title of Security (Instr.3) | 2. Trans-<br>action<br>Date<br><br>(Month/<br>Day/Year) | 3. Trans-<br>action Code<br>(Instr. 8) | 4. Securities Acquired (A)<br>or Disposed of (D)<br>(Instr. 3,4 and 5) | 5. Amount of<br>Securities<br>Beneficially<br>Owned at End<br>Issuer's<br>Fiscal Year<br>(Instr. 3 and |
|--------------------------------|---|--|--|--|
|                                |   | Code                                   | Amount (A) or (D)  | Price  |

\*If the form is filed by more than one reporting person, SEE Instruction 4(b)(v).

POTENTIAL PERSONS WHO ARE TO RESPOND TO THE COLLECTION OF INFORMATION  
 CONTAINED IN THIS FORM ARE NOT REQUIRED TO RESPOND UNLESS THE FORM  
 DISPLAYS A CURRENTLY VALID OMB CONTROL NUMBER.

FORM 5 (continued)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned  
(E.G., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 4. Transaction Code (Instr. 8) | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) |     |
|--|--|--------------------------------------|--------------------------------|--|-----|
|  |  |                                      |                                | (A)  | (D) |
| Option                                     | \$1.75   | 10/3/2000                            | A4                             | 25,000   |     |

| 6. Date Exercisable and Expiration Date (Month/Day/Year) | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Number of Derivative Securities Beneficially Owned at End of Year (Instr. 4) | 10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4) | 11. Name of Reporting Person |   |
|--|---|--|---|--|------------------------------|---|
| Date   | Expir-ation Date  | Title                                      | Amount or Number of Shares  |  |                              |   |
| 10/3/2000  | 10/2/2010   | Common Stock                               | 25,000  | (See explanation below)  | 30,000                       | D |

Explanation of Responses:

Options issued by Latin American Casinos, Inc. to the Reporting Person in consideration for the Reporting Person serving on the Board of Directors.

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations  
SEE 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually

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signed. If space provided is insufficient, SEE instruction 6 for procedure.

By: Jose Caballero

/s/ JOSE CABALLERO

February 14, 2001

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\*\*Signature of Reporting Person

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Date

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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