

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P19000019178

**Entity Name:** 4SHOOTERS, INC.

**Current Principal Place of Business:**

900 N FEDERAL HWY  
306  
HALLANDALE, FL 33009

**Current Mailing Address:**

900 N FEDERAL HWY  
306  
HALLANDALE, FL 33009

**FEI Number:** 83-3964631

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LARINA, CATHERINE  
900 N FEDERAL HWY  
306  
HALLANDALE, FL 33009 US

*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

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            P  
Name            LARINA, CATHERINE  
Address        900 N FEDERAL HWY STE 306  
City-State-Zip: HALLANDALE FL 33009

Title            VP  
Name            LARIN, MAXIM  
Address        900 N FEDERAL HWY  
                  306  
City-State-Zip: HALLANDALE FL 33009

*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:** CATHERINE LARINA

**PRESIDENT**

**01/16/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date