FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

N97000006757 (5) DOCUMENT #

RISING STARS SHOOT-OUT, INC.

FILED Feb 26 1998 8:00am Secretary of State

Principal Place of Business Malling Address										
VICTORY PACK/ 7000 WEST PAL BOCA RATON F	METTO PARI	K ROAD	7000 WES	VICTORY PACKAGING. INC. 7000 WEST PALMETTO PARK ROAD BOCA RATON FL 33433				3. Date Incorporated or Qualified 12/02/1997		
SOOM HATOIT !	L 00100		000					4. FEI Number Applied For		
							65-0804264 Not Applicable			
2. Principal Pl	ace of Busin	ness	2a. Mailii 28	2a. Mailing Address 28				5. Certificate of Status Desired S8.75 Additional Fee Regulred		
Sulte, Apt.	#, etc.		Suite 27	Suite, Apt. #, etc.				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
City & State	•		City	City & State				7. Is this nonprofit corporation a homeowners association?		
23			28					☐ Yes ★★No		
Zip		Country	Zip	Zip Country				This corporation owes or has paid the current year Intangible		
24		25 29 30 30 30 30 30 30 30 3						Personal Property Tax due June 30. Yes No		
	9. Name	and Address of Co	urrent Registered	Agent		61	Nama	10. Name and Address of New Registered Agent		
	DA180					P'	Name			
KANTOR, DAVID VICTORY PACKAGING, INC.						82	Street A	set Address (P.O. Box Number is Not Acceptable)		
7000 WE)		63							
BOCA RATON FL 33433							City	FL 85 Zip Code		
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.										
·										
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
12.	OFFICERS AND DIRECTORS				13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE NAME			-	DELETE	1.1 TI 1.2 N/		D/V	Mark DeAtley ☐ Change ★ Addition 12774 Spikerush Circle		
STREET ADDRESS					1.3 51	REET	ADDRESS	Boca Raton, FL 33428		
CITY-ST-ZIP					1.4 CI	TY-\$1	r-ZIP			
TITLE				DELETE	2.1 TI	TLE +)/T	Jeff Schner □ Change 44 Addition		
NAME					2.2 N	ME_	""	6283 Amberwoods Drive		
STREET ADDRESS					2.3 \$1	REET	ADDRESS	Boca Raton, FL 33433		
CITY-ST-ZIP				2.40			T-ZIP			
TITLE				DELETE	3.1 TI	ITE _	15	David Kantor		
NAME					3.2 N	ME _T)/P	7000 West Palmetto Park Road		
STREET ADDRESS							ADDRESS	Suite 306		
CITY-ST-ZIP					3.4. C	TY-\$	T-ZIP	Boca Raton, FL 33433		
THTLE				DELETÉ	4.1 Tf	nle.		☐ Change ☐ Addition		
NAME					4.2 N	AME				
STREET ADDRESS					4.3 S1	REET	ADDRESS			
CITY-ST-ZIP			<u>-</u>		4.4 CI	TY-S1	r-zip			
TITLE				DELETE	5.1 T/	TLE		☐ Change ☐ Addition		
NAME					5.2 N	ME				
STREET ADDRESS					5.3 ST	REET	ADDRESS			
CITY-ST-ZIP					5.4 CI	TY-SI	r-zip			
TITLE				☐ DELETE	6.1 Ti	rle.		☐ Change ☐ Addition		
NAME					6.2 N	ME				
STREET ADDRESS					6.3 \$1	REET	ADDRESS			
CITY-ST-ZIP					6.4 CI			In Section 119 07/3Vi) Floride Statutes I further certify that the information		

plied with this filling does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify into the informatic lemental annual reports is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in indicated on this annual report or supp officer or director of the corporation of Block 12 or Block 13 if changed, or on