SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT 1997 DOCUMENT #

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

> Secretary of State DIVISION OF CORPORATIONS

FILED Sep 19 1997 8:00am Secretary of State

VICTORIOUS PROPERTIES, INC.					
1.5.0	1000 11101 21111201 11101			I PROPINCIO NO CONTRA ROPPI ORDINA DE	UNI aci ny ac har adian para prima han kan
Principal Place	e of Business	Mailing Address		(4001/02) (40 12/1/ 0/0]) #5/1/ #6/1/ #	Des a maile matibe merge ederm films feet 1881
9941 SW 4TH		9941 SW 4TH STREET			
PLANTATION I US	FL 33324	PLANTATION FL 33324 US		DO NOT WRITE	IN THIS SPACE
		00		3. Date Incorporated or Qualified	3a. Date of Last Report
				01/25/1994	05/28/1996
	ace of Business	2a. Mailing Address	· +1 111	4. FEI Number	Applied For
21 599	1 (R) N. Federal Hwy	26 5990(R)	N. Federa / Hwy	/ 65-047.1900	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	suderedale. Fl.	City & State	ondalo F.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip_	Country	Zip	Country	8. This corporation owes or has pa	
24 333	0 8 25 USA	29 33308	30 USA	Personal Property Tax due June	30. Ø Yes □ No □
	9. Name and Address of Current I	Registered Agent		10. Name and Address of New Re	gistered Agent
SCHOLNIK, LOUIS N B1 Name And 14 L. (6/14					
2400 EAST COMMERCIAL BLVD. B2 Street Addres				ole)	
SUITE 820			83	NOFAL'S MYME	·
FU	RT LAUDERDALE FL 33308		°° 599	O (R) N. FEDERA!	' Hwy
			84 City	1 Audandula	FL 85 Zin Code 33308
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 obligation of Society (Section 607.0505, Florida Statutes.					
SIGNATURE	Mita	Sela	orida Otorologi	9//	5/97
	Signature, typed or printed hame of registered agent	and tillo if applicable. (NO)	F. Registered Agent signature requir		DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	DPST KAHOOK	LJ DELETE	1.1 TITLE		Change Addition
NAME	NOFAL, KAHOOK 9941 SW 4TH STREET		1.2 NAME		į.
STREET ADDRESS	PLANTATION FL		1.3 STREET ADDRESS		\!
CITY-ST-ZIP TITLE	DVP	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME	URI, SUZAN		2.2 NAME		
STREET ADDRESS	5005 NW 58TH TERR		2.3 STREET ADDRESS		1
CITY-ST-ZIP	CORAL SPRINGS FL		2 4 City-SI-ZIP		i
TITLE		☐ DELET e	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME		C OFFER	5.2 NAME		
STREET ADORESS	**		5.3 STREET ADDRESS		}
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		Į
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
	y certify that the information supplied v	vith this filing does not quali		in Section 119.07(3)(i), Florida Statute	s. I further certify that the

information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.