

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

SEP 11 - 1 PM 9:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000063116 (5)**

1. Corporation Name

VICTORY VENTURES, INC.

Principal Place of Business

**201 SOUTH BISCAYNE BLVD. STE. 2000
MIAMI FL 33131**

Mailing Address

**201 SOUTH BISCAYNE BLVD. STE. 2000
MIAMI FL 33131**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

08/19/1994

4. EI Number

65-0513439

Applied For

Not Applicable

2. Principal Place of Business

21 c/o Cribb Construction

2a. Mailing Address

26

Suite Apt. # etc.

22 29930 SW 172 Ave.

Suite Apt. # etc.

27

City & State

23 Homestead, FL

City & State

28

Zip

24 33030

Country

25 Dade

Zip

29

Country

30

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032.

Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

**PARKER, CLAYTON E
201 SOUTH BISCAYNE BLVD. STE. 2000
MIAMI FL 33131**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 obligations of Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of the person who is the registered agent and the officer or director)

(Signature of the registered agent, if separate from the officer or director)

(Date)

12. OFFICERS AND DIRECTORS

12.1 TITLE NAME STREET ADDRESS CITY, ST. ZIP	President and Director Victor Cribb, Sr. 29930 SW 172 Ave. Homestead, FL 33030
12.2 TITLE NAME STREET ADDRESS CITY, ST. ZIP	Secretary/Treasurer and Director Victor Cribb, Jr. 29930 SW 172 Ave. Homestead, FL 33030
12.3 TITLE NAME STREET ADDRESS CITY, ST. ZIP	
12.4 TITLE NAME STREET ADDRESS CITY, ST. ZIP	
12.5 TITLE NAME STREET ADDRESS CITY, ST. ZIP	
12.6 TITLE NAME STREET ADDRESS CITY, ST. ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE NAME STREET ADDRESS CITY, ST. ZIP	☐ Change ☐ Addition
13.2 TITLE NAME STREET ADDRESS CITY, ST. ZIP	☐ Change ☐ Addition
13.3 TITLE NAME STREET ADDRESS CITY, ST. ZIP	☐ Change ☐ Addition
13.4 TITLE NAME STREET ADDRESS CITY, ST. ZIP	☐ Change ☐ Addition
13.5 TITLE NAME STREET ADDRESS CITY, ST. ZIP	☐ Change ☐ Addition
13.6 TITLE NAME STREET ADDRESS CITY, ST. ZIP	☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 135.02(3)(b), Florida Statutes. I further certify that the information included in 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. I am an officer or director of the corporation or the person or persons empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of changed officers or directors attached with an address.

SIGNATURE:

Victor J. Cribb, Sr.

Victor J. Cribb, Sr., President
Victor Cribb, Jr., Sec/Treas.

5/1/95 305- 247-8396