

FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P98000041199

1, Corporation Name

VICTORY CIRCLE, INC.

Principal Place of Business

Mailing Address

10670 BOCA ENTRADA BLVD. **BOCA RATON FL 33428** 

10670 BOCA ENTRADA BLVD. **BOCA RATON FL 33428** 

## **FILED** Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90226 036 \*\*\*150.00



Suite, Apt. 4, etc.    Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Cry & State   Cry & Sta	DOON HATON VE SOMES			DO NOT WRITE IN THE	S SPACE	
2. Principal Prison of Business   2. Mainty Address   2. Mainty Address   3. Conflicte of Status Desired   58.75 Additional				3. Date Incorporated or Qualifed		
Suite, April, etc.    Suite, April, etc.   Suite, A				05/04/1998		
Suite, Apt #, etc.  23 Suite, Apt #, etc.  25 Suite	2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
Suite, Apt #, etc.  23 Suite, Apt #, etc.  25 Suite	21 1129 SW Abisco Rd	26 1129 SWAY	<u>oisco Rol</u>	65-0852221	Not Applicable	
City & State   City & Cit	Suite, Apt. #, etc.	Suite, Apt. #, etc.	<del></del>		•	
Addition for Fees    April   A	22			<b>J. G. G. G. G. G. G. G. G</b>		
Zip Country						
9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  11. Name and Address of New Registered Agent  12. Street Address (P.O. Box Number is Not Acceptable)  13. Name  14. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-harmed 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 signal. I am familiar with, and accept the obligations of, Section 607.6505, Florida Statutes, and the appointment as registered with a familiar with, and accept the obligations of, Section 607.6505, Florida Statutes.  14. Pursuant to the provisions of Section 607.0502 and 607.1508. Florida Statutes, the above-harmed 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 signal and analysis and applications of Section 607.6505, Florida Statutes, the above-harmed corporation submits this statement for the purpose of changing its registered directors. I hereby accept the appointment as registered directors. I hereby accept the appointment as registered signal and applications to the purpose of changing its registered directors. I hereby accept the appointment as r	23 Hort St. Lucie, + loricle		<u>le, Flori</u>	Trust Fund Contribution		
9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  SAUBER, HEIDI 10670 BOCA ENTRADA BLVD. BOCA RATON FL 33428  11. Pursuant to the provisions of Sections 807.0502 and 607.1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I mentilize with, and accept the obligations of, Section 807.0505, Florids Statutes.  12. Pursuant to the provisions of Sections 807.0502 and 607.1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I mentilize with, and accept the obligations of, Section 807.0505, Florids Statutes.  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			7	1		
SAUBER, HEIDI 10670 BOCA ENTRADA BLVD. BOCA RATON FL 33428  11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Fiords 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 Flords. Such change was authorized by the corporation's board directors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE Signature, bood of violet agreed of registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  12. TITLE  12. TITLE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Naw. 12. Naw. 12. TITLE 13. TITLE 14. TITLE 14. TITLE 15. TITLE 15		<u> </u>				
11. Pursuant to the provisions of Sections 807.0502 and 507.1508, Florida Statutes, the above-named corporation's submit she statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the composition submits the statement for the purpose of changing its registered agent, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board officetors, I thereby accept the approximent as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board officetors, I thereby accept the approximent as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board officetors, I thereby accept the approximent as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's but statement for the purpose of changing its registered agent, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board officetors, I thereby accept the approximent as registered discounts and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board officetors, I thereby accept the approximent as registered discounts and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board officetors, I thereby accept the approximant as registered discounts and accept the obligations of the proposed Agent agent and accept the obligations of the proposed Agent agent and accept the obligations of the proposed Agent agent and accept the obligations of the proposed Agent	5. Name and Address of Curren	it itegistered Agent	81 Name			
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BOCA RATON FL 33428  83  84   Sity   State   S	l ·			ddress (P.O. Box Number is Not Acceptable)		
11. Pursuant to the provisione of Sections 607.0502 and 607.1508. Florids Statutes, the above-tended corporation submits this statement for the purpose of changing its registered office or registered agent, i an it is state of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, i an it is make with, and accept the obligations of, Section 607.0505, Florids Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. NAME  12. NAME  13. TITLE  13. TITLE  14. Change  14. City. 51. 2P  14. City. 51. 2P  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. City. 51. 2P  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16. Change  17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS AND DI				XI SO HOISED NO		
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agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE	44. Burry and to the provincing of Sections 607 0602 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered					
SIGNATURE   Signature, page of printed name of registered game of a specialists. (NOTE Registered Agent Signature required when relocations)   DATE	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					
12.						
TITLE	SIGNATURE Signature, typed or printed name of registered age	ent and title if applicable. (NOTE: Re	gistered Agent signature rec	puired when reinstating) DATE		
12 NAME	12. OFFICERS AF	ND DIRECTORS	13.			
13 STREET ADDRESS   13 STREET ADDRESS   14 CITY-ST-ZP   21 TITLE     Change   Addition	TITLE President	☐ DELETE			☐ Change ☑ Addition	
Addition   City-st-ZP	NAME Heidi		1.2 NAME	Heidi Sauber		
TITLE	STREET ADDRESS				<b>~</b>	
TITLE	CITY-ST-ZIP		1.4 CITY-ST-ZIP	Port St. Lucie, Fl 3495.	<u></u>	
23 STREET ADDRESS   23 STREET ADDRESS   24 CITY-ST-ZIP	TITLE	☐ DELETE		•	☐ Change ☐ Addition	
CITY-ST-ZIP	NAME	3	2.2 NAME			
DELETE   DELETE   3.1 TITLE   Change   Addition	STREET ADDRESS		2.3 STREET ADORESS			
NAME NAME STREET ADDRESS	CITY-ST-ZIP		2.4 CITY-ST-ZIP			
STREET ADDRESS   33 STREET ADDRESS   34 CITY-ST-ZIP	TITLE	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition	
STREET ADDRESS   STRE	NAME		3.2 NAME			
DELETE	STREET ADDRESS		3.3 STREET ADDRESS			
NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  DELETE  5.1 TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CHange  Addition  Addition  Addition  Addition  Addition  AMME  STREET ADDRESS  CITY-ST-ZIP  CHANGE  6.3 STREET ADDRESS  CITY-ST-ZIP  CHANGE  ADDRESS  CHANGE  CHANGE	CITY-ST-ZIP		3.4. CITY-ST-ZIP			
A STREET ADDRESS   A STREET ADDRESS   A STREET ADDRESS   A A CITY-ST-ZIP	TITLE	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition	
Addition	NAME		4. 2 NAME			
### DELETE   DELETE   5.1 TITLE   Change   Addition	STREET ADDRESS		4.3 STREET ADDRESS			
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STREET ADDRESS	TITLE	☐ DELETE			☐ Change ☐ Addition	
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CITY-ST-ZIP 6.4 CITY-ST-ZIP	STREET ADDRESS		6.3 STREET ADDRESS			
	CITY-ST-ZIP		8.4 CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. 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, with all other like empowered.

SIGNATURE:

RINTED NAME OF SIGNING OFFICER OR DIRECTOR

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