PROFIT CORPORATION ANNUAL REPORT 1999



## FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT.# P98000066036 1. Corporation Name

THE SHOOTING RANGE, INC.

....

Principal Place of Business Mailing Address

## FILED Feb 26, 1999 8:00 am Secretary of State

02-26-1999 90029 013 \*\*\*163.75



7000 WEST PALMETTO PARK ROAD SUITE 400 7000 WEST PALMETTO PARK BOCA RATON FL 33433 7000 WEST PALMETTO PARK BOCA RATON FL 33433			ROAD S	iuite 400	DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed  07/28/1998	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number 5 - 087 1576 Applied For Not Applicable	
21   25     Suite, Apt. #, etc.   Suite, Apt. #,			<del></del>		\$8.75 Additional	
22		27			5. Certificate of Status Desired Fee Required	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	<u> </u>		Country		8. This corporation owes the current year Intangible	
24	25 29 30				Personal Property Tax.	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent	
			8	1 Nam	me	
7000	Garellek, Steven 7000 west palmetto park road suite 400		8:	2 Stree	Address (P.O. Box Number is Not Acceptable)	
BOCA RATON FL 33433			8:	3		
			8.	4 City	85 Zip Code	
				1		
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			*		CATÉ	
				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
12.	President/Sec-Trea	S DELETE	13. 1.1 TILE		☐ Change ☐ Addition —	
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1	86 Guided Court #	23			8	
	Stobicake Ontacio	May 4Kb CANADA	1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP LETE 2.1 TITLE Change Addition			
					Change   Addition   C	
	Mark Martenfeld					
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CITY-ST-ZIP			54 CITY-			
TITLE		☐ DELETE	6.5 TITLE		. Change Addition	
NAME			6.2 NAME		'	
STREET ADDRESS	}		8.3 STRE	ET ADDRES	ESS	
CITY-ST-ZIP			6.4 CITY-		<u> </u>	
4 4 1 1 1 2 2 2 2 2 2	A	this filling door not qualify for the		tion etal	ated in Section 119.07(3)(i), Florida Statutes. I further certify that the information	

14. I hereby certify that the information supplied with this filling 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 cath; that I am an officer or director of the corporation or the precisiver 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 any attachment with an address, with all other like empowered.

SIGNATURE:

Jan 19/19

727-538-3850