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**PROFIT
CORPORATION
ANNUAL REPORT
1996**



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

DOCUMENT # V28131

(3)

1. Corporation Name

MAGNUM RANGES, INC.



Principal Place of Business

Mailing Address

**C/O VALDES-FAULI, COBB, BISCHOFF & KRISS
2 S BISCAYNE BLVD. 1 BISCAYNE TOWER. #3400
MIAMI FL 33131-1897**

**C/O VALDES-FAULI, COBB, BISCHOFF & KRISS
2 S BISCAYNE BLVD. 1 BISCAYNE TOWER. #3400
MIAMI FL 33131-1897**

2. Principal Place of Business

2a. Mailing Address

21

State, Apt., etc.

26

State, Apt., etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

9. Name and Address of Current Registered Agent

**VALDES-FAULI CORPORATE SERVICES, INC.
2 S. BISCAYNE BLVD.
1 BISCAYNE TOWER, SUITE 3400
MIAMI FL 33131-1897**

81 Name

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

83

84 City

FL 85 Zip Code

3. Date Incorporated or Qualified
04/13/1992

3a. Date of Last Report
05/12/1995

4. FIC Number
65-0422730

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

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

8. This corporation has liability for intangible tax under s. 190.032,
Florida Statutes. ☐ Yes ☒ No

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Section 607.02(2)(a), 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 607.02(2)(a), Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

1. TITLE ☐ DELETED
NAME **DP BOULTON, FREDDY**
STREET ADDRESS **2 S. BISCAYNE BLVD-1BISCAYNE TOWER-3400**
CITY-STATE-ZIP **MIAMI FL 33131-1897**

2. TITLE ☐ DELETED
NAME **DV VARGAS, JESUS**
STREET ADDRESS **2 S. BISCAYNE BLVD-1 BISCAYNE TOWER-3400**
CITY-STATE-ZIP **MIAMI FL 33131-1897**

3. TITLE ☐ DELETED
NAME
STREET ADDRESS
CITY-STATE-ZIP

4. TITLE ☐ DELETED
NAME
STREET ADDRESS
CITY-STATE-ZIP

5. TITLE ☐ DELETED
NAME
STREET ADDRESS
CITY-STATE-ZIP

6. TITLE ☐ DELETED
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ Change ☐ Addition

2. NAME

3. STREET ADDRESS

4. CITY-STATE-ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY-STATE-ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY-STATE-ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY-STATE-ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY-STATE-ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-STATE-ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is true and correct, and does not qualify for the exemption stated in Section 13.6A of the Florida Statutes. I further certify that the information reported 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 registered agent or a company or an individual exempted from such filing by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on any addition within all blocks.

SIGNATURE

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Freddy Boulton

3/18/96

(305) 376-6000

CR2E034 (12/95)