


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 16, 2005 08:00 AM
Secretary of State

DOCUMENT # P02000035588
 1. Entity Name
 STRATEGIC INVESTMENT GROUP INC.



Principal Place of Business: 2874 NO. STATE RD. 7 LAUDERDALE LAKES, FL 33313
 Mailing Address: 2874 NO. STATE RD. 7 LAUDERDALE LAKES, FL 33313



05122005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number: 02-0579147 Applied For: Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 BROWN, RUPERT
 2874 NORTH STATE RD. 7
 LAUDERDALE LAKES, FL 33313

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	BROWN, RUPERT
STREET ADDRESS	2874 NO. STATE RD. 7
CITY-ST-ZIP	LAUDERDALE LAKES, FL 33313
TITLE	D
NAME	BROWN, SYLVIA
STREET ADDRESS	2874 NO. STATE RD. 7
CITY-ST-ZIP	LAUDERDALE LAKES, FL 33313
TITLE	VP
NAME	BROWN, ANDRE'
STREET ADDRESS	2874 NO. STATE RD. 7
CITY-ST-ZIP	LAUDERDALE LAKES, FL 33313
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/12/05 954 486 7474
 Date Daytime Phone #