2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2005 8:00 am
Secretary of State
03-10-2005 90145 011 ***150.00

DOCUMENT # P04000055500

1. Entity Name
STRATS INC

Principal Place of Business	Mailing Address
5771 BAYVIEW DR. FT. LAUDERDALE, FL 33308	5771 BAYVIEW DR. FT. LAUDERDALE, FL 33308

03022005 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
10140 Torchwood Ave	10140 Torchwood Ave
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Plantation Fl	City & State: Plantation Fl
Zip: 33324 Country: USA	Zip: 33324 Country: USA

4. FEI Number 56-2450648 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MODAS, DANIEL A
1215 S.E. 2ND AVE., #202
FT. LAUDERDALE, FL 33335

7. Name and Address of New Registered Agent:

Name

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

City **FL** Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P SIMIC, DANILO 5771 BAYVIEW DR. FT. LAUDERDALE, FL 33308	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 10140 Torchwood Avenue Plantation Fl 33324
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V HACHMANN-SIMIC, SANDRA 5771 BAYVIEW DR. FT. LAUDERDALE, FL 33308	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 10140 Torchwood Avenue Plantation Fl 33324
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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)(i), 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: Danilo Simic 03/04/2005 954 854 1991
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #