FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **350625** **(0)**

1. Corporation Name

THE STRATFORD HOUSE, INC.

Principal Place of Business	Mailing Address
C/O PACIFIC R. E. MGT CORP. #406 2490 CORAL WAY MIAMI FL 33145 US	C/O PACIFIC R. E. MGMT- CORP. 14003 2490 CORAL WAY MIAMI FL 33145 US

3. Date Incorporated or Qualified: **08/12/1969**

3a. Date of Last Report: **04/24/1995**

4. FEI Number: **59-1273064** ☐ 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. Does corporation Qualify for intangible tax under s. 199.032, Florida Statutes? ☐ Yes ☐ No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

9. Name and Address of Current Registered Agent

MURAI,WALD,BIONDO,MATTHEWS & MORENO, PA
25 S.E. SECOND AVENUE, SUITE #900
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Numbers Not Acceptable)
83
84 City **FL** 85 Zip Code

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

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VP	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	SCHULTHEIS,THEODORE		1.2 NAME	
STREET ADDRESS	422 EAST 58 STREET		1.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY		1.4 CITY-ST-ZIP	
TITLE	VPTD	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	ISAIAS, ESTENFANO		2.2 NAME	
STREET ADDRESS	422 EAST 58 STREET		2.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY		2.4 CITY-ST-ZIP	
TITLE	PSD	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	ISAIAS, ROBERTO		3.2 NAME	
STREET ADDRESS	422 EAST 58 STREET		3.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY		3.4 CITY-ST-ZIP	
TITLE	VPD	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	ISAIAS, WILLIAM		4.2 NAME	
STREET ADDRESS	422 EAST 58TH STREET		4.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY		4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

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14. I do hereby certify that the information supplied with this filing is voluntary, furnished and does not qualify for the exemptions 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.

SIGNATURE: THEODORE SCHULTHEIS 2/21/96 305-859-9811

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Phone #

CR2E034 (12/95)