

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 473943

(9)

1. Corporation Name

BUSINESS STRATEGIES, INC.

Principal Place of Business

2456 NE 26TH ST
LIGHTHOUSE POINT FL 33064

Mailing Address

2456 NE 26TH ST
LIGHTHOUSE POINT FL 33064-8353

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

KAMI, MICHAEL J.
2456 N.E. 26TH ST.
LIGHTHOUSE PT. FL

3. Date Incorporated or Qualified

04/11/1975

3a. Date of Last Report

01/25/1996

4. FCI Number

59-2653352

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. 199.032,
Florida Statutes

Yes No

10. Name and Address of New Registered Agent

1 Name

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

3

4 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered agent's signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE PTD
NAME KAMI, MICHAEL J.
STREET ADDRESS 2456 N.E. 26TH ST.
CITY-ST-ZIP LIGHTHOUSE PT. FL

DELETE

TITLE VSD
NAME KAMI, KATHRYN
STREET ADDRESS 2456 N.E. 26TH ST.
CITY-ST-ZIP LIGHTHOUSE PT. FL

DELETE

TITLE D
NAME KAMI, MICHAEL J.
STREET ADDRESS 2456 N.E. 26TH ST.
CITY-ST-ZIP LIGHTHOUSE PT. FL

DELETE

TITLE D
NAME KAMI, GAIL JOAN
STREET ADDRESS 2456 N.E. 26TH ST.
CITY-ST-ZIP LIGHTHOUSE PT. FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 NAME Change Addition

1.2 NAME Change Addition

1.3 STREET ADDRESS Change Addition

1.4 CITY-ST-ZIP Change Addition

2.1 NAME Change Addition

2.2 NAME Change Addition

2.3 STREET ADDRESS Change Addition

2.4 CITY-ST-ZIP Change Addition

3.1 NAME Change Addition

3.2 NAME Change Addition

3.3 STREET ADDRESS Change Addition

3.4 CITY-ST-ZIP Change Addition

4.1 NAME Change Addition

4.2 NAME Change Addition

4.3 STREET ADDRESS Change Addition

4.4 CITY-ST-ZIP Change Addition

5.1 NAME Change Addition

5.2 NAME Change Addition

5.3 STREET ADDRESS Change Addition

5.4 CITY-ST-ZIP Change Addition

6.1 NAME Change Addition

6.2 NAME Change Addition

6.3 STREET ADDRESS Change Addition

6.4 CITY-ST-ZIP Change Addition

14. I do 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 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 in an addition with an address.

SIGNATURE

[Handwritten Signature]

FILED
Apr 15 1997 8:00am
Secretary of State



CR2E034 (9/96)