

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
 AMOUNT DUE ON OR BEFORE 8/7/96: \$226 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$376.)

FILED

97 SEP 24 AM 9:18

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SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1996 1997	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F96000000309 (2)  
 1. Corporation Name: STRATEGIC ASSETS, INC.

Principal Place of Business 445 BROAD HOLLOW ROAD SUITE 425 MELVILLE, N.Y. 11747	Mailing Address 445 BROAD HOLLOW ROAD SUITE 425 MELVILLE, N.Y. 11747
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3. Date Incorporated or Qualified 01/18/1996	3a. Date of Last Report
4. FEI Number 11-3230315	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 <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 ZIP 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 ZIP 29 Country
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9. Name and Address of Current Registered Agent  
 CORPORATION SERVICE COMPANY  
 1201 HAYS STREET  
 TALLAHASSEE, FL 32301-2525

10. Name and Address of New Registered Agent  
 81 Name  
 82 Street Address (P.O. Box Number is Not Acceptable)  
 83  
 84 City FL 85 ZIP

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 signature required when reinstating) Date

12. OFFICERS AND DIRECTORS

TITLE	PSCD	<input type="checkbox"/> DELETE
NAME	APPEL, RANDALL S	
STREET ADDRESS	445 BROAD HOLLOW ROAD	
CITY-ST-ZIP	MELVILLE, N.Y. 11747	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	300002303763--0
2.4 CITY-ST-ZIP	-09/25/97--01104--017
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	***165.00 ***165.00
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: RANDALL S APPEL 9/5/97 516-249-4990  
 Signature and typed or printed name of signing officer or director Date Daytime Phone #

**STEVEN GREENBERG & CO., P. C.**

Certified Public Accountants  
20 Broad Hollow Road  
Melville, New York 11747

(2)

Steven Greenberg, CPA  
Stephen G. Mazza, CPA

Phone (516) 271-8000  
Fax (516) 271-8001

September 5, 1997

Annual Report Filings  
Division of Corporations  
Post Office Box 1500  
Tallahassee, Florida 32302-1500

RE: Strategic Assets, Inc.  
EIN: 11-3230315  
1997 Annual Report

Gentlemen:

I am the accountant for the above referenced Company. Enclosed please find their 1997 annual report along with a check for \$165 to cover their as if they had filed by May 31, 1997.

The Company never received a first report in the mail and was not aware that an annual report was due by May 31, 1997. In the future the Company will file all reports on a timely basis. Kindly cancel the additional assessment for filing after May 31, 1997, due to reasonable cause. Thank you for your assistance in this matter.

Sincerely,

  
\_\_\_\_\_  
Stephen Mazza  
Certified Public Accountant

SM:sm