

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # F97000003249 (6)

1. Corporation Name

STRACHAN INVESTMENTS LIMITED, INC.

Principal Place of Business
PO BOX 146. TOWN RD
TORTOLA. BRITISH VIRGIN ISLD
OC

Mailing Address
PO BOX 146. TOWN RD
TORTOLA. BRITISH VIRGIN ISLD
OC

FILED

98 NOV -5 PM 3:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/12/1997

4. FEI Number

NOT APPLICABLE

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

81 Name

82 Street Address (P.O. Box Number is 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 Kawa P. Durkin

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

(NOTE: Registered Agent signature required when reinstalling)

DATE

11-5-98

12. OFFICERS AND DIRECTORS

TITLE	PVST	<input type="checkbox"/> DELETE
NAME	STRACHAN, HARRY	
STREET ADDRESS	BAIN Y CIA, OFICENTRO ELECUTIVO LA SABANA	
CITY-ST-ZIP	4 EDIF.2 PISO SAN JOSE COSTA	
TITLE	D	<input type="checkbox"/> DELETE
NAME	STRACHAN, HARRY	
STREET ADDRESS	BAIN Y CIA, OFICENTRO ELECUTIVO LA SABANA	
CITY-ST-ZIP	4 EDIF.2 PISO SAN JOSE COSTA	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	KING, SHEPARD	
STREET ADDRESS	BAIN Y CIA, OFICENTRO ELECUTIVO LA SABANA	
CITY-ST-ZIP	4 EDIF.2 PISO SAN JOSE COSTA	
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	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
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 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 on an attachment with an address.

SIGNATURE: ✓

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SHEPARD KING

300002681619--0

11/3/98 3055790507

Daytime Phone #

CR2E034 (5/98)



THE UNITED STATES
CORPORATION
COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 022349 4303929

AUTHORIZATION :

COST LIMIT :

Petition Project
~~\$135.00~~
\$750.00 (KH)

ORDER DATE : November 5, 1998

ORDER TIME : 2:33 PM

ORDER NO. : 022349-005

CUSTOMER NO: 4303929

CUSTOMER: Ms. Rosa Wong
Greenberg Traurig
1221 Brickell Avenue
20th Floor
Miami, FL 33131

ANNUAL REPORT FILING

NAME: STRACHAN INVESTMENTS LIMITED,
INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janna Wilson

EXAMINER'S INITIALS:

RECEIVED
98 NOV -5 PM 3:22
DIVISION OF CORPORATION

(2)