2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G02988

FILED Apr 22, 2009 Secretary of State

Entity Name: STRAUSS INVESTMENTS, INC.

Current Principal Place of Business:			New Principal Place of Business:	
	HARPE STRE SSEE, FL 323			
ırrent M	lailing Addre	ss:	New Mailing Addre	ss:
	THARPE STRE SSEE, FL 323			
l Number	: 59-2227063	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
ıme and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:
	S, THEODORE	BJR		
	SWOOD HILL SSEE, FL 323	08 US		
LLAHA:	SSEE, FL 323		purpose of changing its register	red office or registered agent, or both,
LLAHA:	SSEE, FL 323 e named entity e of Florida.		purpose of changing its register	red office or registered agent, or both,
LLAHA: e above :he Stat	SSEE, FL 323 e named entity e of Florida. RE:			red office or registered agent, or both, Date
LLAHA: e above the State	SSEE, FL 323 e named entity e of Florida. RE: Electro	submits this statement for the		
e above the State GNATU	SSEE, FL 323 e named entity e of Florida. RE: Electro	submits this statement for the nic Signature of Registered Ag	gent	
e above the State GNATUI	e named entity e of Florida. RE: Electro mpaign Financir S AND DIRECTED PD (KELLY, JOHN 1009 SHALIMA	submits this statement for the nic Signature of Registered Agg Trust Fund Contribution (). CTORS:) Delete A	gent	Date
LLAHA: e above the State GNATUI ction Car FFICER e: ne: lress:	e named entity e of Florida. RE: Electro mpaign Financir S AND DIREC PD (KELLY, JOHN 1009 SHALIM/ TALLAHASSEI CD (STRAUSS, TE 2009 DOGWO	submits this statement for the nic Signature of Registered Agg Trust Fund Contribution (). CTORS:) Delete A UR E, FL 32312 US) Delete	pent ADDITIONS/CHANG Title: Name: Address:	Date GES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: COMAN LEONARD S 04/22/2009