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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G06439

Corporation Name

INVESTMENT & TAX STRATEGIES INC.

FILED Feb 15, 1999 8:00am **Secretary of State**

02-15-1999 90023 045 ***150.00



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ncipal Place of Business		iling Address							
I KIMDALE ST		BOX 698				1		-	
BOX 698	1 KIMDALE ST JIGH ACRES EL 33936				DO NOT WRITE IN THIS SPACE				
EHIGH ACRES FL 33936 S		LEHIGH ACRES FL 33936 US			3. Date Incorporated or Qualifed				
	03					10/29/1982			
		Mailing Address				4. FEI Number		Api	olied For
Principal Place of Business	F	Walling Address				59-2232237		. No	t Applicable
	26	Suite Ant # etc				 		\$8.75 A	dditional
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desire	ed 🗆	Fee Re	
	27	City & State				6. Election Campaign Finance	ing —	\$5.00	May Be
City & State	\vdash	City & State				Trust Fund Contribution	ang 🗆	Added t	
	28	***	Cour	ntn (8. This corporation owes the	current year In	tangible	
Zip Co	ountry	Zip r		nu y		Personal Property Tax.	Carron year in	Yes	□No
25	29		30	_		10. Name and Address of N	ew Registered		
9. Name and A	ddress of Current Regis	tered Agent		81	Name	10. Marrie and Address of te	OT TOBIOTOTO		
	•			61	Name			<u></u>	
ANDERSON, FRED J	<u> </u>		82 Street Address (P.O. Box Number is Not Acceptable)						
1401 KIMDALE ST				\bigsqcup		The state of the s	Car legin elem		ogs ark coper Call (0502 best
LEHIGH ACRES FL 3	3936			83					
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				84	City		. Fl	_	
Pursuant to the provisions of office or registered agent, or agent. I am familiar with, and	both, in the State of Florid	da. Such change was at Section 607 0505. Flor	uthorized	d by utes.	the corporatio	oration submits this statement fo on's board of directors. I hereby	accept the appo	antment as re	gistered
agent. I am familiar with, and	accept the obligations of	, 380001 001.00001 1 101	1100 0101				•	•	
GNATURE	d name of registered agent and title	if applicable. (NOTE	Registered	Agen	t signature required	d when reinstating))	DATE		
Signature, typed or printe	OFFICERS AND DIRE		13.			ADDITIONS/CHANGES TO	OFFICERS A	ND DIRECTO	DRS IN 12
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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 or an attachment with an address, with all other like empowered. CITY-ST-ZIP

SIGNATURE: