FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

G60067

(7)

DOCUMENT #
1. Corporation Name

STRAND ENTERPRISES INC.

OTIANO ESTERI MOLO, INC.										
Principal Place	of Business	Mailing Address					A11 1991 91911 9	1411 41411 6161	11 41811 81811 189 1	
2010 OCEAN FRONT NEPTUNE BEACH FL 32266 US		P. O. BOX 51108 JACKSONVILLE BEAC	P. O. BOX 51108 JACKSONVILLE BEACH FL 32240							
03						 Date Incorporated or Qualified 09/19/1983 	1	te of Last R 04/17/19		
ering '		2a. Mailing Address 26	i. Mahng Address			4. FET Number 59-2324241		Applied For Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	de la la companya de			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State		City & State				6. Election Campaign Financing		\$5.0	00 May Be	
23 Zu	Country	[28] Zip	Count			Trust Fund Contribution 8. This corporation has liability for			d to Fees	
Zip 24	25	29	30	uy		1	entangibiet es ∐No	ax urder s	199.032,	
<u></u>	g. Name and Address of Current	· L · · · · · · · · · · · · · · · · ·	1001			10. Name and Address of New		Agent		
			6	31	Name					
	N, KURT ANDREW		Ē	32	Street Addre	ess (P.O. Box Number is Not Accepta	able)			
	THIRD ST Verde Plaza		6	33						
	NVILLE BEACH FL 32250		1			·		las 2	n Codo	
				34	Orty		FL	85 Z	ip Code	
or registere	o the provisions of Sections 607,0502 a ad agent, or both, in the State of Florida n, and accept the obligations of, Sectio	i. Such change was authorizi	ed by the co	e nar irpon	med corpora ation's board	ation submits this statement for the p d of directors. Thereby accept the ap	urpose of chi pointment a	ianging its s registered	registered office d agent. I am	
SIGNATURE ,	Stands are is pred on product flactic of regulation if a peril as	of title of county catain (158)	Frankod A	anwit a	rann' se rubored	when real statings	 DATE		· · · · · · · · · · · · · · · ·	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OF		D DIRECTO	ORS IN 12	
TITLE	PTO	□ DELETE.	DELETE 1 1 TOL					Change	Addition	
NAME	UNDERWOOD, ROGER		1.2 NAM	/E						
STREET ADDRESS	2010 STRAND ST.		1.3 STR	SEFAE	DORESS					
CHTY -ST - ZIP	NEPTUNE BEACH FL		140111	r-\$1-	<i>7</i> 10°					
TITLE	VS	☐ DELETE	2 1 1111	Lŧ				Change	☐ Addition	
NAME	UNDERWOOD, BRENDA K.		2 2 NAM	2.2 NAME						
STREET ADDRESS	2010 STRAND ST.		2 3 SFRI	EELAI	DDRESS					
CSTY - ST - ZIP	NEPTUNE BEACH FL	. <u> </u>	2.4.0/11	<u>r - S1</u>	ZIP					
TITLE		☐ DELETE	3 1 T.TU	l F				☐ Change	Addition	
NAME			3 2 NAN							
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NAME			4.2 NAM		202000					
STREET ADDRESS			4.3 STRI		1					
CITY-ST-ZIP TITLE		☐ DELETE	4.4 City 5.5 Tiff		(P)			Change	Addition	
NAME		LJ breen	5 2 NAM					☐ outside	L. F.Sulesh	
			53 SIR		nnarce					
STREET ADDRESS			54 City							
CITY - ST - ZIP TITLE		☐ DELFTE	6 1 III.		*!			Change	Addition	
NAME			6.2 NAM						_	
STREET ADDRESS			63 S ¹ R		DONESS					
CITY - ST - ZIP			6.4 CITY						1	
	certify that the information supplied w	ith this filing is voluntarily furr				or the exemption stated in Section 11	9.07(3)(k), F	Ionda Stati	ites. I further	

certify that the information indicated on this armual 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 AND THE DE PRINTED NOW OF SIGNING OFFICER OR DIRECTOR

4-7-96 94-445-9777