

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # K60143 (0)
1. Corporation Name
MAJOR STRATEGIES, INC.

Principal Place of Business 5350 NW 21ST AVE. FT LAUDERDALE FL 33309	Mailing Address 5350 NW 21ST AVE. FT LAUDERDALE FL 33309
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1995 W. Commercial Blvd. Suite, Apt. #, etc. 22 Hangar 48B City & State 23 Ft. Lauderdale, FL Zip 24 33309		2a. Mailing Address 26 1995 W. Commercial Blvd. Suite, Apt. #, etc. 27 Hangar 48B City & State 28 Ft. Lauderdale, FL Zip 29 33309		3. Date Incorporated or Qualified 01/23/1989		4. FEI Number 65-0102465 Applied For Not Applicable	
Country 25 USA		Country 30 USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent

WISE, ROBERT S.
3418 HANDY ROAD
SUITE 204
TAMPA FL 33618

10. Name and Address of New Registered Agent

81 Name	Patrick Scott Major
82 Street Address (P.O. Box Number is Not Acceptable)	1995 W. Commercial Blvd. #48B
83	
84 City	Ft. Lauderdale
85 Zip Code	FL 33309

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

Patrick S. Major
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

01/21/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D MAJOR, PATRICK S. <input checked="" type="checkbox"/> DELETE	1.1 TITLE	PST <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MAJOR, PATRICK S.	1.2 NAME	Patrick S. Major
STREET ADDRESS	1722 W LAS OLAS	1.3 STREET ADDRESS	1995 W. Commercial Blvd. #48B
CITY-ST-ZIP	FT LAUDERDALE FL 33312-7517	1.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33309
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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, if any, on address.

SIGNATURE:

Patrick Scott Major

President

01/28/98

(954) 776-1626

CR2E034 (10/97)