

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # M84069

(7)

1. Corporation Name

STRATA HOLDING, INC.

FILED
Apr 01 1996 8:00 am
Secretary of State



Principal Place of Business

% DONALD R. COOK
1589 SOUTH MILITARY TR
W PALM BEACH FL 33415

Mailing Address

% DONALD R. COOK
1589 SOUTH MILITARY TR
W PALM BEACH FL 33415

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc

22 City & State

27 City & State

23 Zip

24 Country

28 Zip

29 Country

9. Name and Address of Current Registered Agent

COOK, DONALD R.
1589 S. MILITARY TRAIL
W. PALM BCH. FL 33415

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

Signature of person providing information for this filing is required.

Date of filing is required.

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	COOK, DONALD R.	☐ DELETE
NAME			
STREET ADDRESS		1589 S. MILITARY TR.	
CITY-STATE-ZIP		W PALM BEACH FL	
TITLE	VD	STRATEMEYER, MADIE A.	☐ DELETE
NAME			
STREET ADDRESS		1589 S. MILITARY TR.	
CITY-STATE-ZIP		W PALM BEACH FL	
TITLE	S	COOK, MARILYN P.	☐ DELETE
NAME			
STREET ADDRESS		1589 S. MILITARY TR.	
CITY-STATE-ZIP		W PALM BEACH FL	
TITLE	T	PARKER, ELAINE S.	☐ DELETE
NAME			
STREET ADDRESS		1589 S. MILITARY TR.	
CITY-STATE-ZIP		W PALM BEACH FL	
TITLE			☐ DELETE
NAME			
STREET ADDRESS			
CITY-STATE-ZIP			
TITLE			☐ DELETE
NAME			
STREET ADDRESS			
CITY-STATE-ZIP			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY-STATE-ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY-STATE-ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY-STATE-ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY-STATE-ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY-STATE-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(g), 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:

Elaine S. Parker
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/18/96 (407) 964-3801
Date of Filing

CR2E034 (12/95)