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May 15 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
**1997**

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

DOCUMENT # **M87554** **(5)**

1. Corporation Name
**STRATCOR, INC.**

| Principal Place of Business | Mailing Address |
|---|---|
| 3710 CORPOREX PARK DR<br>SUITE 300<br>TAMPA FL 33619 | 3710 CORPOREX PARK DR<br>SUITE 300<br>TAMPA FL 33619-1160 |

3. Date Incorporated or Qualified: 06/29/1988
3a. Date of Last Report: 03/18/1996

| 2. Principal Place of Business | 2a. Mailing Address |
|---|---|
| 21 10002 PRINCESS PALM AVE. | 26 10002 PRINCESS PALM AVE. |
| Suite, Apt. #, etc.<br>22 SUITE 304 | Suite, Apt. #, etc.<br>27 SUITE 304 |
| City & State<br>23 TAMPA FL | City & State<br>28 TAMPA FL |
| Zip / Country<br>24 33619 / 25 USA | Zip / Country<br>29 33619 / 30 USA |

4. FEI Number: 59-2909134 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

**9. Name and Address of Current Registered Agent**

KLINGHOFFER, MELVIN
3710 CORPOREX PARK DR
SUITE 300
TAMPA FL 33619

**10. Name and Address of New Registered Agent**

81 Name: THOMAS D. HARRINGTON, JR
82 Street Address (P.O. Box Number is Not Acceptable): 10002 PRINCESS PALM AVE, SUITE 304
83
84 City: TAMPA FL 85 Zip Code: 33619

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: Thomas D. Harrington Jr 4/9/97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

| 12. OFFICERS AND DIRECTORS | | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
|---|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | PD<br>KLINGHOFFER, MEL<br>4604 CLARKSDALE LANE<br>BRANDON FL 33511 | ☒ DELETE | 1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP | P/C/D<br>MEL KLINGHOFFER<br>4604 CLARKSDALE LANE<br>BRANDON, FL 33511 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | CS<br>KLINGHOFFER, MELVIN<br>4604 CLARKSDALE LANE<br>BRANDON FL 33511 | ☒ DELETE | 2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP | S<br>ANA BEDRAN<br>10002 PRINCESS PALM AVE., SUITE 304<br>TAMPA FL 33619 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ DELETE | 3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ DELETE | 4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ DELETE | 5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ DELETE | 6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP | | ☐ Change ☐ Addition |

CR2E034 (9/96)

14. I do 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 with an address.

**SIGNATURE:** MEL KLINGHOFFER 4/9/97 (813) 623-5777