

FILED
Aug 14, 2002 8:00 am
Secretary of State

08-14-2002 90023 004 ***150.00

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P00000058554**

1. Entity Name
STRATEGIC INVESTMENT SOLUTIONS, INC.

Principal Place of Business
**1903 BENT OAK DRIVE
 APOPKA FL 32712**

Mailing Address
**1903 BENT OAK DRIVE
 APOPKA FL 32712**

80134248



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3649452

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SHINHOLSER, JIM
 1903 BENT OAK DRIVE
 APOPKA FL 32712**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P**
 NAME **SHINHOLSER, JAMES R**
 STREET ADDRESS **1903 BENT OAK DR**
 CITY-STATE-ZIP **APOPKA FL 32712**

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CR2E034 (4/02)

Attachment
STRATEGIC INVESTMENT SOLUTIONS, INC.

B0134248

Personal Financial Services

August 12, 2002.

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: Strategic Investment Solutions, Inc. / Document # P00000058554

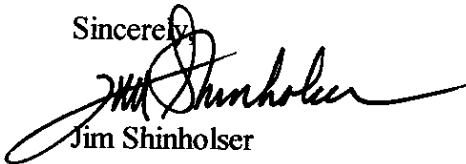
Gentlemen;

Attached is check no. 1024 in the amount of \$150.00 for the annual UBR filing fee.

Pursuant to a conversation with a representative in your office, I am providing this letter of explanation for this delinquent UBR payment. I did not receive a prior mailing or notice of the requirement for this fee. Because of this, I am requesting a waiver of the difference in the amount indicated on the attached form and the payment enclosed. It is my understanding that the annual fee is \$150.00.

Thank you for your consideration and understanding of this matter.

Sincerely,


Jim Shinholser