

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000041823

Entity Name: STRAX INSTITUTE, INC.

FILED
Feb 10, 2006
Secretary of State

Current Principal Place of Business:

4300 N. UNIVERSITY DRIVE
SUITE E-200
LAUDERHILL, FL 33351

Current Mailing Address:

4300 N. UNIVERSITY DRIVE
SUITE E-200
LAUDERHILL, FL 33351

New Principal Place of Business:

4300 NORTH UNIVERSITY DRIVE
E-200
LAUDERHILL, FL 33351

New Mailing Address:

4300 NORTH UNIVERSITY DRIVE
E-200
LAUDERHILL, FL 33351

FEI Number: 87-0693355

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MICHAEL HARRIS, P.A.
1555 PALM BEACH LAKES, BLVD.
SUITE 310
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS ROAD
221E
PALM BEACH GARDENS, FL 33410 US

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.

SIGNATURE: D. STOUTT, ASSISTANT SECRETARY

02/10/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FLYNN, SUSAN
Address: 4300 N. UNIVERSITY DRIVE SUITE E200
City-St-Zip: LAUDERHILL, FL 33351

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: AUER, ALBERT
Address: 4300 NORTH UNIVERSITY DRIVE, E 200
City-St-Zip: LAUDERHILL, FL 33351

Title: D () Change (X) Addition
Name: GARNICK, MICHAEL
Address: 4300 NORTH UNIVERSITY DRIVE, E 200
City-St-Zip: LAUDERHILL, FL 33351

Title: D () Change (X) Addition
Name: DAVIS, JEFF
Address: 4300 NORTH UNIVERSITY DRIVE, E 200
City-St-Zip: LAUDERHILL, FL 33351

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: D. STOUTT AS ATTORNEY IN FACT FOR A. AUER

D

02/10/2006

Electronic Signature of Signing Officer or Director

Date