

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000125280

**FILED**  
**Apr 29, 2009**  
**Secretary of State**

**Entity Name:** STRATEGIC INVESTMENT SERVICES, INC.

**Current Principal Place of Business:**

375 DOUGLAS AVENUE  
SUITE 2007  
ALTAMONTE SPRINGS, FL 32714

**Current Mailing Address:**

375 DOUGLAS AVENUE  
SUITE 2007  
ALTAMONTE SPRINGS, FL 32714

**New Principal Place of Business:**

1325 SOUTH INTERNATIONAL PARKWAY  
SUITE 2221  
HEATHROW, FL 32746

**New Mailing Address:**

1325 SOUTH INTERNATIONAL PARKWAY  
SUITE 2221  
HEATHROW, FL 32746

**FEI Number:** 20-3426092

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FALTER, STEVEN  
375 DOUGLAS AVENUE  
SUITE 2007  
ALTAMONTE SPRINGS, FL 32714 US

**Name and Address of New Registered Agent:**

FALTER, STEVEN  
1325 SOUTH INTERNATIONAL PARKWAY  
SUITE 2221  
HEATHROW, FL 32746 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:**

04/29/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** D ( ) Delete  
**Name:** FALTER, STEVEN  
**Address:** 375 DOUGLAS AVENUE, SUITE 2007  
**City-St-Zip:** ALTAMONTE SPRINGS, FL 32714

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** D (X) Change ( ) Addition  
**Name:** FALTER, STEVEN  
**Address:** 1325 S INTERNATIONAL PARKWAY, SUITE 2221  
**City-St-Zip:** HEATHROW, FL 32746

I hereby certify that the information supplied with this filing does not qualify 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:** STEVEN FALTER

D

04/29/2009

Electronic Signature of Signing Officer or Director

Date