## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

oknow

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

## Apr 23, 2008 8:00 am Secretary of State **DOCUMENT # P07000052909** 1. Entity Name 04-23-2008 90031 020 \*\*\*150.00 STRATEGIC COMMUNICATIONS, INC. Principal Place of Business Mailing Address 522 HUNT CLUB ROAD #228 522 HUNT CLUB ROAD #228 APOPKA, FL 32703 APOPKA, FL 32703 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 522 S. Hunt Club Blvd 522 S. Hunt Club Blvd. Suite, Apt. #, etc Suite, Apt. #, etc. 02182008 CR2E034 (12/06) Chg-P #228 #238 4. FEI Number Applied For *a*o89607 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 1840 SW 22ND ST. ) 4TH FLOOR MIAMI, FL 33145 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. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 THUE ☐ Delete TITLE Vice President Change **Addition** Tracey A. Mertens 522 5. Hunt Club Blvd., #228 JOHNSON, HORTON S NAME NAME STREET ADDRESS 522 HUNT CLUB ROAD #228 STREET ADDRESS APOPKA, FL 32703 Apopla, FL 32703 President, Director CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition THILE THILE Horton S. Johnson 522 S. Hunt Club Blvd., #228 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Apopka, FL 32703 TITLE ☐ Delete TITI F ☐ Change \_ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Channe ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP TITLE Delete TITI E ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if

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