## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000056243

Entity Name: SSSTRATEGY CORP.

FILED Feb 08, 2007 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
--	-----------------------------

260 CRANDON BLVD., #48 200 CRANDON BLVD.

KEY BISCAYNE, FL 33149 SUITE 311

KEY BISCAYNE, FL 33149

Current Mailing Address: New Mailing Address:

260 CRANDON BLVD., #48 200 CRANDON BLVD.

KEY BISCAYNE, FL 33149 SUITE 311

KEY BISCAYNE, FL 33149

FEI Number: 65-0779199 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SALAZAR, LISETTE ESQ. SALAZAR, LISETTE ESQ. 260 CRANDON BLVD., #48 200 CRANDON BLVD. KEY BISCAYNE, FL 33149 US SUITE 311

ET BISCATNE, FL 33149 US SUITE 311
KEY BISCAYNE, FL 33149 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: 02/08/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition STEFANO, SUSANA BEATRIZ STEFANO, SUSANA BEATRIZ Name: Name: 200 CRANDON BLVD #311 260 CRANDON BLVD #48 Address: Address: City-St-Zip: KEY BISCAYNE, FL 33149 City-St-Zip: KEY BISCAYNE, FL 33149

Name: SMITH, VALERIA Name: SMITH, VALERIA

 Address:
 260 CRANDON BLVD #48
 Address:
 200 CRANDON BLVD #311

 City-St-Zip:
 KEY BISCAYNE, FL 33149
 City-St-Zip:
 KEY BISCAYNE, FL 33149

Title: D ( ) Delete Title: D (X) Change ( ) Addition

Name: SMITH, LUCIANO Name: SMITH, LUCIANO

 Address:
 260 CRANDON BLVD #48
 Address:
 200 CRANDON BLVD #311

 City-St-Zip:
 KEY BISCAYNE, FL 33149
 City-St-Zip:
 KEY BISCAYNE, FL 33149

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: SUSANA BEATRIZ STEFANO D 02/08/2007