SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750).

1/2

0054086

PROFIT CORPORATION ANNUAL REPORT 1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
98 AUG 27 AM 9:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P95000077147 (3)**

1. Corporation Name
STRAX, INC.

Principal Place of Business	Mailing Address
12900 SW 133 COURT MIAMI FL 33186	12900 SW 133 COURT MIAMI FL 33186

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/06/1995
4. FEI Number: 65-0612768 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☑ No

	2. Principal Place of Business		2a. Mailing Address
21	12987 S.W. 132 COURT	26	12987 S.W. 132 COURT
22	Suite, Apt. #, etc.: /	27	Suite, Apt. #, etc.:
23	City & State: MIAMI FL	28	City & State: MIAMI, FL
24	Zip: 33186	29	Zip: 33186
25	Country: USA	30	Country: USA

9. Name and Address of Current Registered Agent

TOMASSON, INGVI
12900 SW 133 COURT
MIAMI FL 33186

10. Name and Address of New Registered Agent

81 Name: TOMASSON, INGVI
82 Street Address (P.O. Box Number is Not Acceptable): 12987 S.W. 132 COURT
83
84 City: MIAMI FL 85 Zip Code: 33186

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE: Ingvi Tomasson — DATE: 07-30-98
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
CPD	TOMASSON, INGVI T	12900 SW 133 COURT	MIAMI FL 33186	☐ DELETE
D	BIELTVEDT, OLI A	12900 SW 133 COURT	MIAMI FL 33186	☐ DELETE
VD	NAPOLI, JOSEPH M	12900 SW 133 COURT	MIAMI FL 33186	☐ DELETE
SD	PALACIO, CARLOS A	12900 SW 133 COURT	MIAMI FL 33186	☐ DELETE
TD	BIRGISSON, BIRGIR O	12900 SW 133 COURT	MIAMI FL 33186	☐ DELETE
				☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
1	1.1	1.2	1.3	1.4	☐ Change ☐ Addition
2	2.1	2.2	2.3	2.4	☐ Change ☐ Addition
3	3.1	3.2	3.3	3.4	☐ Change ☐ Addition
4	4.1	4.2	4.3	4.4	☐ Change ☐ Addition
5	5.1	5.2	5.3	5.4	☐ Change ☐ Addition
6	6.1	6.2	6.3	6.4	☐ Change ☐ Addition

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-08/28/98--01047--010
****150.00 ****150.00

CR2E034 (5/98)

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [illegible] 07-30-98 [illegible]

2

STRAX Strax Ltd. | Qualipak Tower | Rm. 1201, 12/F | 122 Connaught Road West
Hong Kong | Tel.: (852) 23 140 670 | Fax: (852) 23 140 690 | strax@glink.net.hk

STRAX, INC. AND
T.S.I. ENTERPRISES, INC.
12987 S.W. 132 COURT

JULY 30, 1998

Division of Corporation
Annual Reports
P.O. Box 6327
Tallahassee, FL 32314

Ref: Corporation Annual Report
Strax, Inc.
Fin: 65-0612768
Document #: P95000077147 (3)
And
T.S.I. Enterprises, Inc.
Fin:65-0612184
Document #: P95000077222 (4)

Dear Sirs:

As per my telephone conversation today with your office, I am enclosing the annual reports for the above two companies, along with my payment of $150.00 for each company.

As I noted on the telephone my father was ill, and I was out of the country attending to his medical needs. Since I am the only one who can sign checks and forms as representative of the company's, I was unable to file these forms since I was away, as a result of this family illness.

I respectively request that you abate any penalties resulting from these medical related circumstances. I have always filed the annual reports in a timely manner in past years and assure you that they will be filed timely in the future.

Thank you in advance for your understanding of this health related situation.

Very truly yours,

Ingvi Tomasson
President