

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000016711

FILED  
Apr 26, 2006  
Secretary of State

**Entity Name:** NATIONAL INVESTMENT STRATEGIES, INC.

**Current Principal Place of Business:**

1000 SW 11TH AVENUE  
BLDG E #7  
HALLANDALE, FL 33009 US

**New Principal Place of Business:**

**Current Mailing Address:**

POBOX 218  
DANIA, FL 330040218 US

**New Mailing Address:**

**FEI Number:** 65-0729866

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

REEVES, ALFRED  
1000 SW 11TH AVE  
BLDG E #7  
HALLANDALE, FL 33009 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

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

**OFFICERS AND DIRECTORS:**

Title: DPST ( ) Delete  
Name: REEVES, ALFRED  
Address: 1815 N SURF TF STE 604  
City-St-Zip: HOLLYWOOD, FL 33019 US

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

Title: DPST (X) Change ( ) Addition  
Name: REEVES, ALFRED  
Address: 1000 S W 11TH AVENUE, BLDG.E#7  
City-St-Zip: HALLANDALE BEACH, FL 33009 US

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:** ALFRED REEVES

DPST

04/26/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date