FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED May 01, 2002 8:00 am Secretary of State

DOCUMENT # P97000062403					05-01-2002 91460 029 ***150.00		
ST	RATEGIC SOLUTI	IONS OF MI	AMI, IN	IC.			
	DO NOT WRITE	IN THIS SP	ACE		•		
	Place of Business SW 1.55 S+	3. Mailing Address 7685 SW	ICC CA	<u>, </u>			
Suite, Ap		Suite, Apt. #, etc.	133 21		DO NOT WRITE IN THIS	SPACE	
City & Sta		City & State	FL	4.	FEI Number 65-0940386	Applied For Not Applicable	
33/5	7 Country USA	33/57	Country USA		Certificate of Status Desired	\$8.75 Additional Fee Required	
 No. •	That is a great section of the secti		Name	` 7. Na	ame and Address of Current Registere		
DO NOT WRITE IN THIS SPACE			Street Address (P.O. Box Number is Not Acceptable)				
8. The above	e named entity submits this statement for t	he purpose of changing its re	egistered office or r	egistered ag	- -		
SIGNATURE	Signature, typed or printed name of registered agent and					-	
	9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (Son exterior as book).		Registered Agent signature	2 required when re	instating) DATE		
Tax filing	poration is eligible to satisfy its Intangible requirement and elects to do so.	January 1 - Ma After May 1, Amended	y 1 Fee is \$150.0 , Fee is \$550.00 UBR is \$61.25 to Department	00	10. Election Campaign Financing	\$5.00 May Be Added to Fees	
Tax filing (See crite	oration is eligible to satisfy its Intangible requirement and elects to do so. eria on back) OFFICERS AND DI	January 1 - Ma After May 1, Amended i Make Check Payable RECTORS	y 1 Fee Is \$150.0 Fee Is \$550.00 UBR Is \$61.25 to Department	00	10. Election Campaign Financing		
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13. 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 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 11 or on an attachment with an address. With all other like empowered.

SIGNATURE:

IFORCE J. QUINTERO

4/19/2002

305.

Date

Daytime Phone #