

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).

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

FILED  
Oct 16 1998 8:00am  
Secretary of State

DOCUMENT # P97000075601 (9)

1. Corporation Name

STRATEGIC ALLIANCE FUNDING & EQUITY, INC.

Principal Place of Business

2100 NE 17 AVE  
FORT LAUDERDALE FL 33305

Mailing Address

2100 NE 17 AVE  
FORT LAUDERDALE FL 33305

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/02/1997

4. FEI Number

65-0791723

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

21 1975 E SUNRISE BLVD

22 SUITE # 721

23 FT. LAUDERDALE, FL

24 33304 25 BROWARD

2a. Mailing Address

26 2100 NE 17 AVE

Suite, Apt. #, etc.

27 FT. LAUDERDALE, FL

28 33305 29 USA-BROWARD

9. Name and Address of Current Registered Agent

WALD, LARRY  
2100 NW 17 AVE  
FORT LAUDERDALE FL 33305

10. Name and Address of New Registered Agent

81 Name CINDY RAGAN

82 Street Address (P.O. Box Number is Not Acceptable)  
2100 N.E. 17 AVE

83

84 City FT. LAUDERDALE

FL

85

Zip Code 33305

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

Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

10-9-98

12. OFFICERS AND DIRECTORS

TITLE D TRODELLA, RICHARD

NAME 2100 NW 17 AVE (NE) ← CR

STREET ADDRESS FORT LAUDERDALE FL 33305

CITY-ST-ZIP

TITLE PSVT

NAME RAGAN, CINDY

STREET ADDRESS 2100 NW 17 AVE (NE) ← CR

CITY-ST-ZIP FORT LAUDERDALE FL 33305

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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:

CINDY RAGAN 7-1-98

CR2E034 (5/98)