

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000015516

FILED
May 03, 2005
Secretary of State

Entity Name: STRATEGIC PRODUCTS, INC.

Current Principal Place of Business:

741 PINETREE DRIVE
INDIAN HARBOR BEACH, FL 32937

New Principal Place of Business:

5100 LAGUNA VISTA DR
MELBOURNE, FL 32934

Current Mailing Address:

741 PINETREE DRIVE
INDIAN HARBOR BEACH, FL 32937

New Mailing Address:

5100 LAGUNA VISTA DR
MELBOURNE, FL 32934

FEI Number: 59-3494380

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARKUSON, ARTHUR
18 MARINA ISLES BOULEVARD
INDIAN BARBOR BEACH, FL 32937 US

Name and Address of New Registered Agent:

MARKUSON, ARTHUR
5100 LAGUNA VISTA DR
MELBOURNE, FL 32934 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: ARTHUR MARKUSON

05/03/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: MARKUSON, ARTHUR
Address: 18 MARINA ISLES BLVD.
City-St-Zip: INDIAN HARBOR BEACH, FL 32937

Title: VSD (X) Delete
Name: HAZARD, GEORGIA
Address: 18 MARINA ISLES BLVD.
City-St-Zip: INDIAN HARBOR BEACH, FL 32937

Title: VD () Delete
Name: MARKUSON, JEFFREY A
Address: 537 DORADO WAY
City-St-Zip: INDIAN HARBOR BEACH, FL 32937

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: MARKUSON, ARTHUR
Address: 5100 LAGUNA VISTA DR
City-St-Zip: MELBOURNE, FL 32934

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: MARKUSON, JEFFREY A
Address: 5100 LAGUNA VISTA DR
City-St-Zip: MELBOURNE, FL 32934

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ARTHUR MARKUSON

PRES

05/03/2005

Electronic Signature of Signing Officer or Director

Date