

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **S86538** (3)

1. Corporation Name  
**STRAUSS INVESTOR SERVICES, INC.**



Principal Place of Business: **C/O SIGRID M. HENSHAW, PA P.O. BOX 150639 CAPE CORAL FL 33915**  
Mailing Address: **C/O SIGRID M. HENSHAW, PA P.O. BOX 150639 CAPE CORAL FL 33915**

**MR. Josef STRAUSS, 1243 Plumosa Dr. FT MYERS FL 33901**

3. Date Incorporated or Qualified <b>10/10/1991</b>	3a. Date of Last Report <b>04/11/1995</b>
4. FEI Number <b>65-0297312</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip	29 Zip
25 Country	30 Country

9. Name and Address of Current Registered Agent <b>SIGRID M. HENSHAW, PA. PRADO PL, SUITE 100 2804 DEL PRADO BLVD S CAPE CORAL FL 33904</b>				10. Name and Address of New Registered Agent			
				81 Name	<b>STRAUSS, JOSEF</b>		
				82 Street Address (P.O. Box Number is Not Acceptable)	<b>1243 Plumosa Dr</b>		
				83			
				84 City	<b>FT. Myers</b>	85 State	<b>FL</b>
						86 Zip Code	<b>33901</b>

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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: **Josef R. STRAUSS** President

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '96	
TITLE	<b>PTS</b>	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>STRAUSS, JOSEF R.</b>	12 NAME	
STREET ADDRESS	<b>2804 DEL PRADO BLVD S</b>	13 STREET ADDRESS	
CITY - ST - ZIP	<b>CAPE CORAL FL</b>	14 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY - ST - ZIP		24 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY - ST - ZIP		34 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY - ST - ZIP		44 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY - ST - ZIP		54 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY - ST - ZIP		64 CITY - ST - ZIP	

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**-06/24/96--01018--007**  
**\*\*\*225.00**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: **Josef R. STRAUSS, R. Josef President** Date: **5/21/96** Digital Phone #: **941 372 4284**

CR2E034 (12/95)