FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V21414

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STRATEGY SUPPORT ASSOCIATES, INC.

Principal Place of Business Mailing Address 2741 N.W. 27TH TERRACE 2741 N.W. 27TH TERRACE **BOCA RATON FL 33434** BOCA RATON FL 33434-6002 3s. Date of Last Report 3. Date Incorporated or Qualified 05/02/1996 03/16/1992 4. FEI Number Principal Place of Business Mailing Address Applied For 65-0316180 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 23 28 Trust Fund Contribution Ζıp Zip Country Country This corporation has liability for interpible tax under s. 199.032, Yes Florida Statutes □ No 30 24 25 29 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent Name WEXELBAUM, GERALD 2741 N.W. 27TH TERRACE Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33434** 83 84 City Zip Code 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Addition PTD DELETE Change 1.1 TITLE TITLE WEXELBAUM, GERALD NAME 12 NAME 2741 N.W. 27TH TERRACE 1.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33434** CHY-ST-ZIP 1.4 CITY-ST-7IP W DELETE Change Addition TITLE 2.1 TITLE WEXELBAUM, JERI-LEE NAME 2.2 NAME 2741 N.W. 27TH TERRACE 2.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33434** 2. 4 CITY-ST-ZIP CITY-ST-7IP DELETE 3.1 TITLE Change Addition 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition THILE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP City-St-7iP DELETE 5.1 TITLE Change Addition TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS COTY - ST - ZIP 5.4 CITY-ST-ZIP ☐ DELETE Change Addition 6.1 TITLE TITLE

14. I do 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 often attachment with an eddress.

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE

NAME STREET ADDRESS

Dity-St-7IP

TYPED OR PRINTED MAME OF SIGNING OFFICER OR DIRECTOR

4/24/97

561-479-3229

FILED

Apr 25 1997 8:00am

Secretary of State

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