2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

Feb 04, 2004 08:00 AM **DOCUMENT # 353617** Secretary of State 1. Entity Name STANLEY O. STERLING P.A. Principal Place of Business Mailing Address 3200 N OCEAN BLVD 3200 N OCEAN BLVD FORT LAUDERDALE FL 33308 FORT LAUDERDALE FL 33308 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) MOORE City & State City & State 4. FEI Number Applied For 59-1274572 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name STERLING, STANLEY O Street Address (P.O. Box Number is Not Acceptable) 3200 N OCEAN BLVD #301 FORT LAUDERDALE FL 33308 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when roinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Change ☐ Addition mue ☐ Delete U00000035211 02/06/04-80009-020 150.00 STERLING, STANLEY O. NAME NAME STREET ADDRESS 3200 N OCEAN BLVD C301 STREET ADDRESS FT. LAUDERDALE FL 33308 CRTY-ST-ZIP CITY-ST-ZIP Change Delete HRE Addition TITLE ROTHENBERG, ALAN NAME MANAF STREET ADDRESS 3101 N FEDERAL #302 STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FL CHTY - ST - ZIP Change ☐ Delete 3313 ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CETY-ST-ZIP CITY-ST-7IP Change THE ☐ Defete BILE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-SE-78 CITY-ST-ZIP Delete THILE Change Addition TITLE NAME NAME STREET ADDRESS STREET ACCRESS CITY-ST-ZIP CRTY-ST-ZIP Delete TELLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST- AP CATY-ST-ZIP 12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

TANLEY O. STERLING

FILED