


# 2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

05 MAR 31 AM 11:02

DOCUMENT # A98000000360						
1. Entity Name <b>STERLING AVIATION, LTD.</b>						
Principal Place of Business <b>1200 BRICKELL AVENUE, SUITE 1500 MIAMI, FL 33131</b>			Mailing Address <b>1200 BRICKELL AVENUE, SUITE 1500 MIAMI, FL 33131</b>			
2. Principal Place of Business <b>801 Arthur Godfrey</b>		3. Mailing Address <b>801 Arthur Godfrey</b>				
Suite, Apt. #, etc.		Suite, Apt. #, etc.				
City & State <b>Miami Beach, FL</b>		City & State <b>Miami Beach, FL</b>		4. FEI Number <b>65-0829475</b>		
Zip <b>33140</b>		Country <b>USA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		
6. Name and Address of Current Registered Agent			7. Name and Address of Now Registered Agent			
<b>BITTEL, STEPHEN</b> <b>1200 BRICKELL AVENUE, SUITE 1500</b> <b>MIAMI, FL 33131</b>			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>			
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>						
9. Capital Contributions as Shown on record. <b>\$200,000.00</b>			10. Amount of Capital Contributions in FLORIDA to date.			
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>						
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY			
DOCUMENT #	L01000020014		STREET ADDRESS	<b>801 Arthur Godfrey</b>		
NAME	STERLING AVIATION, LLC.		CITY-ST-ZIP	<b>Miami Beach, FL 33140</b>		
STREET ADDRESS	1200 BRICKELL AVENUE, SUITE 1500		<b>400050034274</b> <b>04/06/05--01056--001 **526.25</b>			
CITY-ST-ZIP	MIAMI, FL 33131					
DOCUMENT #						STREET ADDRESS
NAME						CITY-ST-ZIP
STREET ADDRESS						
CITY-ST-ZIP						
DOCUMENT #			STREET ADDRESS			
NAME			CITY-ST-ZIP			
STREET ADDRESS						
CITY-ST-ZIP						
DOCUMENT #			STREET ADDRESS			
NAME			CITY-ST-ZIP			
STREET ADDRESS						
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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes						
SIGNATURE: _____			<b>3/27/05</b> <b>305-779-8914</b> <small>Date Daytime Phone #</small>			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER						

STAPLE CHECK HERE