


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 23, 2007 08:00 AM
Secretary of State

DOCUMENT # F06000007514 1. Entity Name STERLING B. S. INC.	
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Principal Place of Business 3125 S. MENDENHALL RD SUITE 399 MEMPHIS, TN 38115	Mailing Address 3125 S. MENDENHALL RD SUITE 399 MEMPHIS, TN 38115
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02192007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 62-1727213	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BERMUDEZ, CESEAR 940 DOUGLAS AVE. UNIT 111 ALTAMONTE SPRINGS, FL 32714
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DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SILVA, ANTHONY 3125 S. MENDENHALL RD MEMPHIS, TN 38115
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT BERMUDEZ, CESEAR 3125 S. MENDENHALL RD MEMPHIS, TN 38115
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MC LAIN, STANLEY 3125 S. MENDENHALL RD MEMPHIS, TN 38115
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<p>U00000646036 03/06/07-80014-007 158.75</p> <p>DO NOT WRITE IN THIS SPACE</p>
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE:  2/20/07 901-258-8873
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #