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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # J09960

(2)

STERLING TRADES, INC.

Principal Place of Business 976 WITHLACOOCHEE ST. SAFETY HATBOR FL 34695

Mailing Address

976 WITHLACOOCHEE ST. SAFETY HATBOR FL 34695-3463

FILED Mar 11 1997 8:00am Secretary of State



					3. Date Incorporated or Qualified 04/18/1986	3a. Date of Li 07/09/199		
4	lace of Business	2a. Mailing Address	V		4. FEI Number	_	Applied For .	
21 1763	9 Spring Valley Re	3, 26 17634 Spri	ng Ya	lley 1	RJ. 59-2661382		Not Applicabl€	
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired	1	.75 Additional ee Required	
City & State					6. Election Campaign Financing	\$5	.00 May Be	
23 Dade	- City, FL	28 Dade City	, FL		Trust Fund Contribution	☐ Ad	ded to Fees	
700 ca	Country	Zip	Country	_	8. This corporation has liability for		der s. 199.032,	
24 ノクラス	3 25 USA	29 33523 30	$^{\circ}$ μ	SA		Yes No		
	9. Name and Address of Curre	iur Hedistelen Adeut	81	Name	10. Name and Address of New Re	Igistered Agent		
SOUCH WAS ESCURO L'Y:				Ivalle				
2515 COUNTRYSIDE BLVD. SUITE A				82 Street Address (P.O. Box Number is Not Acceptable)				
CLEARWATER FL 33575				·				
			84	City			Zip Code	
				<u> </u>		FL °°		
11. Pursuant to office or n	to the provisions of Sections 607.05 egistered agent, or both, in the Stat	i02 and 607.1508, Florida Statutes, te of Florida. Such change was aut	, the abovi horized by	e-named c the corox	corporation submits this statement for the poration's board of directors. I hereby acce	purpose of chang at the appointme	ing its registered int as registered	
agent. Lai	m familiar with, and accept the obli	gations of, Section 607.0505, Floric	da Statute	8.	· · · · · · · · · · · · · · · · · · ·	-1.1.		
SIGNATURE	700 C C C C C C C C C C C C C C C C C C	AGOVE E			equired when rainstating)	<u> 3/6/97</u>		
12.	Signature, typed or purified name of registered a OFFICERS A	ND DIRECTORS	13.	ent signature n	ADDITIONS/CHANGES TO OFFIC	CERS AND DIREC	CTORS IN 12	
1171.6	PD	DELETE	1.1 TITLE	· · ·	7,0011010011111020100111	☐ Ch		
NAME	HAASE, JUANITA S.		12 NAME		,	_	· —	
STREET ADDRESS	280 HAMILTON AVENUE	l	13 STREET	ADDRESS				
City-St-7iP	SAFETY HARBOR FL	ļ	1.4 CITY-5					
TITLE	D	☐ DELĒTE	21 TITLE			☐ Chá	ange Addition	
NAME	HAASE, ERIC	l	22 NAME					
STREET ADDRESS			2.3 STREET ADDRESS					
CITY: ST-ZIF	SAFETY HARBOR FL 249		2 4 CITY-	ST-21P	•			
TITLE		☐ DELETE	3.1 TITLE			☐ Cha	ange Addition	
NAME		l	32 NAME	1				
STHEET ADDRESS			3.3 STREET	ADDRESS				
CITY - ST - ZIF			3.4. CITY-	ST-ZIP				
1/1LE		DELETE	4.1 TITLE			☐ Cha	ange	
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-ST-7IP			4.4 CITY - S	ST-ZIP				
1111.F		☐ DELETE	5.1 TITLE]		☐ Cha	ange 🔲 Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET					
CHTY-S1-7IP			5.4 CITY-5	ST-ZIP				
THILE		DELETE	6.1 TITLE			☐ Cha	ange 🔲 Addition	
NAME			6.2 NAME				ļ	
STHEET ADDRESS			6.3 STREET	ADDRESS				
CHY-S1-ZIP			6.4 CITY-5					
14. I do heret	by certify that the information suppli	ed with this filing does not qualify f	tor the exe	emption sta	ated in Section 119.07(3)(i), Florida Statute	as. 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:

352-521-3600