

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED:

95 JUL -5 AM 9:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J61740 (3)

1. Corporation Name

STERLING CONSULTING REALTY, INC.

Principal Place of Business

17800 W. DIXIE HWY "C"
MIAMI BEACH FL 33160

Mailing Address

P. O. BOX 600676
MIAMI BEACH FL 33160
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

03/13/1987

3a. Date of Last Report

08/10/1994

4. FEI Number

59-2773554

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 169.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 139 N.E. 39th St

Suite, Apt. #, etc.

22

City & State

23 Miami

24 33137

Country

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27

City & State

28

Country

29

30

9. Name and Address of Current Registered Agent

HEAVEN, D. CRAIG
17800 W. DIXIE HWY
MIAMI BEACH FL 33160

1146 JEFFERSON ST
HOLLYWOOD, FL
33019

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is not acceptable)

83

84

FL

85

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent Signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	TS
NAME	HEAVEN, D. CRAIG
STREET ADDRESS	1146 JEFFERSON ST
CITY - ST - ZIP	HOLLYWOOD FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	800001530798
1.4 CITY - ST - ZIP	-07/06/95--01049--015
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	****225.00 ****225.00
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information included 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 resolver 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Per 5/17/95 305 982-7714