2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Jan 27, 2005 08:00 AM DOCUMENT # M92852 **Secretary of State** 1. Entity Name STERLING REALTY, INC. Principal Place of Business Mailing Address 3535 WINDMILL RANCH RD FT LAUDERDALE FL 33331 US 3535 WINDMILL RANCH RD FT LAUDERDALE FL 33331 US 2. Principal Place of Business 3. Mailing Address Suite, Apt #, etc. Suite, Apt #, etc 1st MOORE CR2E034 (10/04) Applied For City & State City & State 4, FEI Number 65-0068155 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name TRUPKIN DENIS P Street Address (P.O. Box Number is Not Acceptable) 3535 WINDMILL RANCH ROAD FT LAUDERDALE FL 33331 Zip Code City 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 reinstating) DATE FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. TITLE ם חיד Change ☐ Addition Delete NAME TRUPKIN, DENNIS NAME STREET ADDRESS STREET ADDRESS 3535 WINDMILL RANCH RD CITY-ST-7IP FT LAUDERDALE FL CILY - ST - ZIP Change ☐ Addition HILE ☐ Delete DTI F 01/27/05-80036-006 150.00 NAME TRUPKIN, LINDA NAME STREET ADDRESS STREET ADDRESS 3535 WINDMILL RANCH ROAD FT LAUDERDALE FL CHY-ST-7P CITY-ST-ZIE Change Addition TOTALE Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition Delete TITLE NAME NAME STREET AUDRESS STREET ADDRESS CHTY-ST-ZIP CUTY-ST-ZIE Addition TITLE ☐ Delete SITE NAME STREET ADDRESS STREET ADDRESS (JTY-\$1-71E CITY-ST-ZIP Addition Delete ECTLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS City -ST-7IP CITY ST-ZIP

12. I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(f), 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: