

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000033990

FILED
Feb 02, 2005
Secretary of State

Entity Name: STERLING ULTRA PRECISION, INC.

Current Principal Place of Business:

3102 CHERRY PALM DRIVE
TAMPA, FL 33619

New Principal Place of Business:

Current Mailing Address:

3102 CHERRY PALM DRIVE
TAMPA, FL 33619

New Mailing Address:

FEI Number: 59-3714683

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIES, ALAN
3102 CHERRY PALM DRIVE
TAMPA, FL 33619 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTS () Delete
Name: DAVIES, ALAN
Address: 16313 MILLAN DE AVILA
City-St-Zip: TAMPA, FL 33613

Title: D () Delete
Name: ACHKOUTI, FADI
Address: 18103 REGENTS SQUARE DRIVE
City-St-Zip: TAMPA, FL 33647

Title: D () Delete
Name: MCLEAN, PAUL
Address: 2210 GOLF MANOR BLVD.
City-St-Zip: VALRICO, FL 33594

Title: D () Delete
Name: JASKIEL, GEORGE
Address: 6226 GREENWICH DRIVE
City-St-Zip: TAMPA, FL 33647

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: JASKIEL, GEORGE
Address: 404 PINE BLUFF DRIVE
City-St-Zip: LUTZ, FL 33549

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALAN DAVIES

MR

02/02/2005

Electronic Signature of Signing Officer or Director

Date