

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000043783

Entity Name: STERLING SALES, INC.

FILED  
Apr 26, 2004  
Secretary of State

## Current Principal Place of Business:

6095 W. 19TH AVE., SUITE 315  
HIALEAH, FL 33012

## New Principal Place of Business:

6095 W. 19TH AVE.  
#315  
HIALEAH, FL 33012

## Current Mailing Address:

6095 W. 19TH AVE., SUITE 315  
HIALEAH, FL 33012

## New Mailing Address:

6095 W. 19TH AVE.  
#315  
HIALEAH, FL 33012

FEI Number: 65-1105200

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STAMBURY, SUSYE  
6095 W. 19TH AVE., SUITE 315  
HIALEAH, FL 33012

## Name and Address of New Registered Agent:

STAMBURY, SUSYE  
6095 W. 19TH AVE.  
#315  
HIALEAH, FL 33012

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: SS

04/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: STAMBURY, SUSYE  
Address: 6095 W. 19TH AVE., SUITE 315  
City-St-Zip: HIALEAH, FL 33012

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: SUSYE STAMBURY

D

04/26/2004

Electronic Signature of Signing Officer or Director

Date