

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2005 8:00 am
Secretary of State

04-08-2005 90033 035 ***150.00

DOCUMENT # P01000093829

1. Entity Name
STIRLING WATER COMPANY, INC.



Principal Place of Business
**2365 SW 34TH ST
#4
FORT LAUDERDALE, FL 33315**

Mailing Address
**2365 SW 34TH ST
#4
FORT LAUDERDALE, FL 33315**

20027866



2. Principal Place of Business
6585 NW 13th Court
Suite, Apt. #, etc.

3. Mailing Address
1050 NW 93rd Ave.
Suite, Apt. #, etc.

03212005 Chg-P CR2E034 (10/03)

City & State
Plantation, FL
Zip
33313
Country
Broward

City & State
Plantation, FL
Zip
33322
Country
Broward

4. FEI Number
65-1148031
Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MATRICACIA, RICHARD L
2365 SW 34TH ST
#4Y
FORT LAUDERDALE, FL 33315**

7. Name and Address of New Registered Agent

Name
Richard L. Matricaria
Street Address (P.O. Box Number is Not Acceptable)
6585 NW 13th Court
Plantation, FL
City
FL Zip Code
33313

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]

4-3-05

Signature typed or printed name of registered agent and state if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
P	MATRICARIA, JEAN	1050 NW 93 AVENUE	PLANTATION, FL 33322	<input type="checkbox"/>
VP	MATRICARIA, RICHARD L	1050 NW 93 AVENUE	PLANTATION, FL 33322	<input type="checkbox"/>
S	MATRICARIA, ELIZABETH	2900 NO COURSE DR	POMPANO BEACH, FL 33069	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify 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 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, not empowered.

SIGNATURE:

[Signature]

4-3-05

954-937-7629

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

RICHARD L. MATRICARIA