

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000090051

FILED  
Feb 21, 2008  
Secretary of State

Entity Name: STIRLING INVESTORS II, INC.

**Current Principal Place of Business:**

9269 SHERIDAN ST  
COOPER CITY, FL 33024

**New Principal Place of Business:**

**Current Mailing Address:**

5722 S. FLAMINGO RD  
PMB# 377  
COOPER CITY, FL 33330

**New Mailing Address:**

FEI Number: 20-3085586      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

M. SCOTT KLEIMAN, ESQUIRE  
7320 GRIFFIN ROAD  
SUITE 109  
DAVIE, FL 33314 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: D ( ) Delete  
Name: DRAIZIN, LAWRENCE  
Address: 11715 STRAND WAY  
City-St-Zip: COOPER CITY, FL 33026

Title: D ( ) Delete  
Name: DRAIZIN, ERIC  
Address: 8956 NW 9TH PLACE  
City-St-Zip: PLANTATION, FL 33324

Title: D (X) Delete  
Name: DRAIZIN, CHAD  
Address: 1440 VAN BUREN ST  
City-St-Zip: HOLLYWOOD, FL 33020

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: DRAIZIN, CHAD  
Address: 1440 VAN BUREN ST  
City-St-Zip: HOLLYWOOD, FL 33020

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CHAD DRAIZIN

D

02/21/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date