

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000090051

FILED
Apr 24, 2009
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:

11715 STRAND WAY
COOPER CITY, FL 33026

Current Mailing Address:

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

New Mailing Address:

11715 STRAND WAY
COOPER CITY, FL 33026

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, CHAD
Address: 1440 VAN BUREN ST
City-St-Zip: HOLLYWOOD, FL 33020

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: DRAIZIN, CLAUDIA A
Address: 11715 STRAND WAY
City-St-Zip: COOPER CITY, FL 33026

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: CLAUDIA A DRAIZIN

DP

04/24/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date