2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000020409

Entity Name: STERLING VENDING CORP.

FILED Apr 21, 2009 Secretary of State

Littly Name: STEREING VENDING CORF.					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	PER COURT ILL, FL 34606	US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
8143 CLIPPER COURT SPRING HILL, FL 34606 US		19815 SEA RIDER W/ LUTZ, FL 33559	19815 SEA RIDER WAY LUTZ, FL 33559		
FEI Number:	26-2086859	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
ZUCKERMAN, BRIAN A 19815 SEA RIDER WAY LUTZ, FL 33559 US			19815 SEA RIDER WA	ZUCKERMAN, MARTHA W 19815 SEA RIDER WAY LUTZ, FL 33559 US	
The above in the State		ubmits this statement for the p	urpose of changing its registere	d office or registered agent, or both,	
SIGNATURE: MARTHA W. ZUCKERMAN				04/21/2009	
Electronic Signature of Registered Agent			nt	Date	
Election Can	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P, D () I JACOBY, DAVID 8143 CLIPPER O SPRING HILL, FI	COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T, D () [ZUCKERMAN, BI 19815 SEA RIDE LUTZ, FL 33559	R WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP, () I ZUCKERMAN, M 19815 SEA RIDE LUTZ, FL 33559	R WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SEC () I ZUCKERMAN, M 19815 SEA RIDE LUTZ, FL 33559	R WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title [.]	D ()!)elete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: MARTHA W. ZUCKERMAN VP 04/21/2009

ZUCKERMAN, MARTHA W

19815 SEA RIDER WAY

LUTZ, FL 33559 US

Name:

Address:

City-St-Zip: