

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P08000020409

**FILED**  
**Jan 11, 2012**  
**Secretary of State**

**Entity Name:** STERLING VENDING CORP.

**Current Principal Place of Business:**

8143 CLIPPER COURT  
SPRING HILL, FL 34606 US

**New Principal Place of Business:**

**Current Mailing Address:**

19815 SEA RIDER WAY  
LUTZ, FL 33559

**New Mailing Address:**

**FEI Number:** 26-2086859

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ZUCKERMAN, MARTHA W  
19815 SEA RIDER WAY  
LUTZ, FL 33559 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:** MARTHA W ZUCKERMAN

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P, D  
**Name:** JACOBY, DAVID M  
**Address:** 8143 CLIPPER COURT  
**City-St-Zip:** SPRING HILL, FL 34606 US

**Title:** T, D  
**Name:** ZUCKERMAN, BRIAN A  
**Address:** 19815 SEA RIDER WAY  
**City-St-Zip:** LUTZ, FL 33559 US

**Title:** VP,  
**Name:** ZUCKERMAN, MARTHA W  
**Address:** 19815 SEA RIDER WAY  
**City-St-Zip:** LUTZ, FL 33559 US

**Title:** SEC  
**Name:** ZUCKERMAN, MARTHA W  
**Address:** 19815 SEA RIDER WAY  
**City-St-Zip:** LUTZ, FL 33559 US

**Title:** D  
**Name:** ZUCKERMAN, MARTHA W  
**Address:** 19815 SEA RIDER WAY  
**City-St-Zip:** LUTZ, FL 33559 US

I hereby 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 all other like empowered.

**SIGNATURE:** MARTHA W ZUCKERMAN

VP

01/11/2012

Electronic Signature of Signing Officer or Director

Date