FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P93000047110 (0)**

STERLING REAL ESTATE, INC.

Pri	ncipal	Place	of	Busines
547	EAST	WOOD	DF	t

CITY - ST - ZIP

Mailing Address

FILED May 15 1997 8:00am Secretary of State

NAPLES FL 33		NAPLES FL 34110-1113 US		Date Incorporated or Qualified 07/06/1993	3a. Date of Last Report 04/29/1996			
2. Principal F	Place of Business	2a. Mailing Address	1 1000.10	4. FEI Number	Applied For			
	GOLDEN CATE PHEROUS		SUPTE HOLLION	-y 65-0435342	Not Applicable			
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite Apt. #, etc. ZUITE 106				5. Certificate of Status Desired	\$8.75 Additional Feo Required			
	ples, Fi	City & State 28 NAPLES F	₹	Election Campaign Financing Trust Fund Contribution	\$5.00 May Bo Added to Fees			
Zip 34	105 25 Country		Country 00 USA		Yes No			
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Re	gistered Agent			
	ko, edward a jr		B1 Name					
	EASTWOOD DR LES FL 33942		82 Street Addr	82 Street Address (P.O. Box Number is Not Acceptable)				
			83					
			84 City		FL 85 70 Code (1)			
SIGNATURE	Signature, typed or printed name of registered age	rit and title if applicable (NOTE:	Brigistered Agent signature requir	od whon reinsteing) ADDITIONS/CHANGES TO OFFIC	DATE OF RS AND DIRECTORS IN 12			
TITLE	P	DELETE	1.1 TILLE	ADDITION OF THE COLUMN	Change Addition			
NAME	ZYSKO, EDWARD A JR		1.2 NAMI					
STREET ADDRESS	547 EASTWOOD DR.		1.3 STREET ADDRESS					
CITY-ST-ZIP	NAPLES FL		14 CITY-SE (IP)	34110				
TITLE	VST	DELETE	2 1 TIPLE		☐ Change ☐ Addition			
NAME	ZYSKO, DOROTHEA P		2 2 NAME					
STREET ADDRESS	547 EASTWOOD DR.		2 3 STREET ADDRESS	28(11)				
CITY-ST-ZIP	NAPLES FL		2 4 D IY-SI	34110				
TITLE		☐ DECETE	3 1 TITLE		Charige Addition			
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET ADDRESS					
CITY-ST-ZIP		DELETE	3.4 CITY - S1 - ZIP 4.1 TITLE		Change Addition			
NAME		- orrest	4. 2 NAME		Onlange Mulifier			
STREET ADDRESS			4.3 STREET ADDRESS					
CITY-ST-ZIP			4.4 CITY - ST - ZIP					
TITLE	,	DELETE	5.1 TITLE		Change Addition			
NAME			5.2 NAMI					
STREET ADDRESS			5.3 STREET ADDRESS					
CITY-ST-ZIP			5.4 CHY-S1-7P					
TITLE		DELETE	611MLF		Change Addition			
NAME			62 NAME					
STREET ADDRESS			6.3 STREET ADDRESS					

6.4 CITY-S1-ZiP

14. I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under each; if 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, find that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.