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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

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STERLING ENTERPRISES OF BREVARU, INC. Principal Place of Business Mailing Address 1050 SOUTH BABCOCK STREET 1050 SOUTH BABCOCK STREET MELBOURNE FL 32901 MELBOURNE FL 32901 3. Date Incorporated or Qualified 3a. Date of Last Report 07/26/1993 10/10/1995 Principal Place of Business 4, FEI Number Applied For 2. 2a. Mailing Address 21 59-3193827 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zio Country 8. This corporation has liability for intangible tax under s. 199.032, Yes KNo 24 25 29 30 Florida Statutes g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name STERLING, DAVID L 82 Street Address (P.O. Box Number is Not Acceptable) 983 YUMA STREET S.E. 83 PALM BAY FL 32909-4956 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) (12/95)12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 P ST DELETE Change Addition TITLE 1.1 TITLE NAM: ERLING, DAVID L. 1.2 NAME CR2E034 983 YUMA ST SE STREET ADDRESS 1.3 STREET ADDRESS PALM BAY FL 56 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITLE Change Addition 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP Change □ DELETE TITLE 3 1 TITLE ■ Add-tion NAME 3.2 NAME STREET ADDRESS 3.3. STREET ADDRESS CHY-ST-ZIP 34 CITY- \$1-ZIP DELETE TITLE 4 1 TITLE Change: Addition NAME 42 NAME STREET ADDRESS 4.3 STREET ADDRESS City - St - ZiP 44 CITY - ST - ZIP DELETE TITLE 5 1 TITLE Change: ☐ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-21P 5.4 City - St - ZiP TOLE DELETE 6 1 TITLE Change: Addition NAME 6.2 NAME STREET ADORESS 63 STREET ADDRESS CITY - ST - ZIP 64 CITY-ST-ZIP

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 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 in Block 12 or Block 13 if chapted, or on an attachment with an address. ged, or on an attachment with an address.

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further

SIGNATURE:

DANID STEPLING 4/26/96