

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000073661 (9)

1. Corporation Name

STIRLING ROAD CORP.

Principal Place of Business

**2720 CORAL WAY
FOURTH FLOOR
MIAMI FL 33145
US**

Mailing Address

**2720 CORAL WAY
FOURTH FLOOR
MIAMI FL 33145
US**



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**DEL VALLE, IGNACIO G
2333 PONCE DE LEON BLVD
STE 650
CORAL GABLES FL 33134**

3. Date Incorporated or Qualified

10/15/1993

3a. Date of Last Report

01/30/1995

4. FEI Number

65-0442320

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. 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 street address

(NOTE: Registered Agent signature required when filing this statement)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **PD
BLANCO, FRANCISCO E**
STREET ADDRESS **2333 PONCE DE LEON BLVD #650**
CITY-ST-ZIP **CORAL GABLES FL**

TITLE ☐ DELETE

NAME **VPTD
BLANCO, FRANCISCO J**
STREET ADDRESS **2720 CORAL WAY, 4TH FLOOR**
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ DELETE

NAME **VPSP
DEL ROSAL, JORGE L JR**
STREET ADDRESS **2720 CORAL WAY**
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ DELETE

NAME **D
BLANCO, JORGE A**
STREET ADDRESS **7440 SW 66 ST**
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ DELETE

NAME **D
DEL ROSAL, VIRGINIA**
STREET ADDRESS **9400 OLD CUTLER LANE**
CITY-ST-ZIP **CORAL GABLES FL**

TITLE ☐ DELETE

NAME **D
DEL ROSAL WILSON, ELENA**
STREET ADDRESS **10740 SW 74 CT**
CITY-ST-ZIP **MIAMI FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ Change ☐ Addition

12. NAME

13. STREET ADDRESS

14. CITY-ST-ZIP

2. TITLE ☐ Change ☐ Addition

22. NAME

23. STREET ADDRESS

24. CITY-ST-ZIP

3. TITLE ☐ Change ☐ Addition

32. NAME

33. STREET ADDRESS

34. CITY-ST-ZIP

4. TITLE ☐ Change ☐ Addition

42. NAME

43. STREET ADDRESS

44. CITY-ST-ZIP

5. TITLE ☐ Change ☐ Addition

52. NAME

53. STREET ADDRESS

54. CITY-ST-ZIP

6. TITLE ☐ Change ☐ Addition

62. NAME

63. STREET ADDRESS

64. CITY-ST-ZIP

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 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 changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FRANCISCO BLANCO, JR.

3/21/96 (305) 783-8506

CR2E034 (12/95)