

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 14, 2001 8:00 am**  
**Secretary of State**

03-14-2001 90522 032 \*\*\*150.00

**DOCUMENT # P93000073661**

1. Entity Name

**STIRLING ROAD CORP.**

Principal Place of Business

10120 SW 93RD AVE  
 MIAMI FL 33176  
 US

Mailing Address

10120 SW 93RD AVE  
 MIAMI FL 33176  
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0442320**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DEL VALLE, IGNACIO G**  
**CARLTON FIELDS, 4000 NATIONS BANK**  
**TOWER, 100 SE 2ND ST.**  
**MIAMI FL 33131**

Name

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

City

**FL**

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☒ Change ☐ Addition  
**10120 SW 93rd Avenue**  
**MIAMI, FL 33176**

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**VPSD**  
**DEL ROSAL, JORGE L JR**  
**9400 SW 116TH ST**  
**MIAMI FL 33176** ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D**  
**BLANCO, JORGE A**  
**7440 SW 68 ST**  
**MIAMI FL 33143** ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☒ Change ☐ Addition  
**360 Saddlebrook Drive**  
**Roswell, GA 30075**

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D**  
**DEL ROSAL, VIRGINIA**  
**7215 SW 54TH CT**  
**MIAMI FL 33143** ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☒ Change ☐ Addition  
**12005 SW 69th PL**  
**MIAMI, FL 33156**

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☒ Change ☐ Addition  
**4951 SW 80th ST.**  
**MIAMI, FL 33143**

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Change ☐ Addition

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**FRANCISCO E. BLANCO**

**3/12/01**  
 Date

**305-273-5689**  
 Daytime Phone #

CR2E034 (10/00)