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FILED
Apr 29 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P93000083162 (6)

1. Corporation Name:
STERLING AND KING, INC.



Principal Place of Business

274 WILSHIRE BLVD.
SUITE 269
CASSELBERRY FL 32707
US

Mailing Address

300 WILSHIRE BOULEVARD
NO. 238
CASSELBERRY FL 32707

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

26 274 WILSHIRE BLVD
27 SUITE 269
28 CASSELBERRY, FL
29 32707 30 SEMINOLE

3. Date Incorporated or Qualified

11/23/1993

4. FEI Number

59-3220287

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

ZENCHOFF, PAULA
274 WILSHIRE BLVD., SUITE 269
NO. 238
CASSELBERRY FL 32707

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 change of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the president, officer, or director of the corporation

(If the Registered Agent is not the president, officer, or director of the corporation, the signature of the Registered Agent is required when filing this statement.)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME ZENCHOFF, PAULA
STREET ADDRESS 274 WILSHIRE BLVD., SUITE 269
CITY-ST-ZIP CASSELBERRY FL

TITLE P
NAME ZENCHOFF, PAULA
STREET ADDRESS 274 WILSHIRE BLVD #269
CITY-ST-ZIP CASSELBERRY FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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14. 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 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 of this change of information on an attachment with an address.

CR2E034 (10/97)