FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT 1996

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

DOCUMENT # P94000093279 (5)

1. Corporation Name
STERLING MOTORS, INC.

Principal Place of Business
2600 DOUGLAS ROAD
406
CORAL GABLES FL 33134
US

Mailing Address
2600 DOUGLAS ROAD
406
CORAL GABLES FL 33134
US

3. Date Incorporated or Qualified: 12/20/1994
3a. Date of Last Report: 05/01/1995
4. FEI Number: 65-0544916 — 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

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

9. Name and Address of Current Registered Agent

GONZALEZ, CARLOS E.
2600 DOUGLAS ROAD
SUITE 406
CORAL GABLES FL 33134

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 607.1505, 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) DATE ____

12. OFFICERS AND DIRECTORS

TITLE	DP	☐ DELETE
NAME	~~MENDOZA, CLAUSIO J.~~	
STREET ADDRESS	8275 SW 53RD AVENUE	
CITY-ST-ZIP	MIAMI FL	
TITLE	DVPS	☐ DELETE
NAME	GONZALEZ, CARLOS	
STREET ADDRESS	9971 SW 122ND STREET	
CITY-ST-ZIP	MIAMI FL	
TITLE	VP	☑ DELETE
NAME	~~MENDOZA, RAMON G.~~	
STREET ADDRESS	~~10310 SW 90 STREET~~	
CITY-ST-ZIP	~~MIAMI FL~~	
TITLE	DV	☐ DELETE
NAME	BLANCO, MANUEL	
STREET ADDRESS	13280 SW 114TH TERRACE	
CITY-ST-ZIP	MIAMI FL 33186	
TITLE	DVT	☐ DELETE
NAME	LOPEZ, MANUEL	
STREET ADDRESS	9025 SW 83RD ST.	
CITY-ST-ZIP	MIAMI FL 33173	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☑ Change ☐ Addition
1.2 NAME	MENDOZA, CLAUDIO J.	
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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: ____ 4/15/96 (305) 461-9941
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CARLOS E. GONZALEZ - DIRECTOR

CR2E034 (12/95)