## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT #** P95000028051

1. Corporation Name

54 & STERLING INVESTMENTS, INC.

## **FILED** Mar 19, 1999 8:00 am Secretary of State

03-19-1999 90009 033 \*\*\*\*\*8.75 03-19-1999 90009 034 \*\*\*150.00



Principal Place	of Business	Mailing Address					{BB( BB(   B  8 B  B     B     B     B	Blif Balit Phi		2) <b>0)(%) )(0) (0)</b>
3101 N. FEDERAL HWY 2880 NE 29TH STREET SUITE 504 FT. LAUDERDALE FL 33306							DO NOT WR	ITE IN THI	IS SPACE	
US							3. Date Incorporated or Qualifed			
}						04/0	06/1995			
	lace of Business	2a. Mailing Address				4. FEI N			<del></del>	Applied For
21 6221			lant?	c D	100	<u>65-0</u>	576910			lot Applicable Additional
Suite, Apt.		Suite, Apt. #, etc.					cate of Status Desired	×	Fee R	Required
City & State	este FL	28 Margete	FL			Trust	ion Campaign Financing Fund Contribution		Added	May Be I to Fees
Zip 0 24 3304		Zip 0 7 30 30 30	Country	· 		Perso	corporation owes the cur onal Property Tax.		Yes	□No
	9. Name and Address of Current	Registered Agent		Nome	1	10. Nam	e and Address of New	Registere	1 Agent	<del></del>
OI ID	ECHI DENICE		81	Name						
QURESHI, DENISE 3101 N. FEDERAL HWY				Street Address (P.O. Box Number is Not Acceptable)						
SUITE 504				83 (602) WH+lantic Blud.						
FT. LAUDERDALE FL 33306					_					
			84	Payn.	~ cO 4	مان		F	L 85 20	Code 3043
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the above	e-named	corpara	tion subn	nits this statement for the	purpose 0	of changing it	ts registered
l office or n	egistered agent, or both, in the State of m familiar with, and accept the obligation	' Florida. Such change was auth	onzed by	the corp	oration's	board of	f directors. I hereby acce	pt the app	ointment as r	egisterea
SIGNATURE	Do Qual	ii President						1/26	199	•
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: Re	gistered Ager	nt signature :	required wh			DATE		
12.	OFFICERS AND	DIRECTORS	13.			ADDIT	IONS/CHANGES TO OF	-FICERS F	Change	
TITLE	DPST	Choccerc	1.3 IIILE				_	-		
NAME CTREET ADDRESS	Qureshi, Denise 2880 ne 29th Street			TADDRESS	60.	21	w. Atlant	ic B	lvd.	
STREET ADDRESS CITY-ST-ZIP	FT. LAUDERDALE FL 33306		1.4 CITY-S		Mai		te fl 3	306	₹	
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STREET ADDRESS			2.3 STREE	TADDRESS						
CITY-ST-ZIP			2. 4 CITY-5	ST-ZIP						
TITLE		☐ DELETE	3.1 TITLE						Change	Addition
NAME			3.2 NAME			•				ĺ
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NAME			6.2 NAME							
			63 STREE	TADORESS	]					Į.

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 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP