FLORIDA DÉPARTMENT OF STATE

**FILED** 

Jan 27, 1999 8:00am

## Katherine Harris

		Secretary of State DIVISION OF CORPORATIONS		Secretary of State 01-27-1999 90011 002 ****150.00	
1. Corporation is	ENT # P950000 STERING, INC.	041231			
· .		Mailing Address		f 10011002 419 thint ditti natiti šavit natiti sa	
Principal Place of Business 9266 LAZY LANE TAMPA FL 33614		9266 LAZY LANE TAMPA FL 33614		DO NOT WRITE IN THI  3. Date incorporated or Qualifed  05/22/1995	
		2a. Mailing Address		4. FEI Number 59-3195115	Not Applicable
2. Principal Place of Business		26		5. Certificate of Status Desired	\$8.75 Additional Fee Required
21 Suite, Apt. #, etc.		Suite, Apt. #, etc. 27 City & State		Certificate of Status Desired     Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
City & State	ر منتسب میشنده استشار با در این	28	Country	Trust Fund Contribution      This corporation owes the current year	Intangible
Zip	Country	Zip 30	Country	Demonal Property Tax.	<u> </u>
24	9. Name and Address of Curre		81 Name	10. Name and Address of New Registere	<u>,u                                    </u>
TESTA, PHILIP J 4726-B N. LOIS AVE. TAMPA FL 33614  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes office or registered agent, or both, in the State of Florida. Such change was aut agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			83   84   City	ess (P.O. Box Number is Not Acceptable)  oration submits this statement for the purposon's board of directors. I hereby accept the a	85 Zip Code e of changing its registered pointment as registered
agent. I a	m familiar with, and accept the obli	gations of, Section 607.0000, 7.0000	a Statutes.		
SIGNATURE		gent and title if applicable. (NOTE: NOTE: NO	13.	ADDITIONS/CHANGES TO OFFICER:	Change Addition
12. TITLE NAME	D LOPEZ, RAUL JR	DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS		S AND DIRECTORS IN 12 Change Addition  Change Addition
STREET ADDRESS	TAMPA FL 33614		1.4 CITY-ST-ZIP		Change Addition C
TITLE  NAME  STREET ADDRES	D W SZENIOV	DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	·	☐ Change ☐ Addition
CITY-ST-ZIP	TAMPA PL 83614	DELETE	3.1 TITLE  3.2 NAME		- Manage から、別に続い質様
STREET ADDRES	SS (2001)	☐ DELETE	3.3 STREET ADDRESS  3.4. CITY-ST-ZIP  4.1 TITLE		Change : Addition
NAME STREET ADDRE	: 1		4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
CTY-ST-ZIP TITLE NAME		☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS		:
STREET ADDRI CITY-ST-ZIP TITLE	LANCE OF PRICE	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME		☐ Change ☐ Addition
NAME STREET ADDR	272 for a 5		6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	2 110 07(3Vi) Florida Statutes. I fur	ther certify that the information

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 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.