

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000076884 (2)

1. Corporation Name

STIRLING REALTY PARTNERS, INC.



Principal Place of Business

Mailing Address

228 71ST STREET
MIAMI BEACH FL 33141

228 71ST STREET
MIAMI BEACH FL 33141

2. Principal Place of Business

2a. Mailing Address

21 18090 Collins Ave.

26 18090 Collins Ave.

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 T14

28 T14

City & State

City & State

23 N. Miami Beach FL

28 N. Miami Beach FL

24 Zip

25 Country

29 Zip

30 Country

24 33160

25 USA

29 33160

30 USA

9. Name and Address of Current Registered Agent

BARATZ, PHILIP J
2400 E. COMMERCIAL BLVD.
#814
FT. LAUDERDALE FL 33308

3. Date Incorporated or Qualified
10/06/1995

3a. Date of Last Report

4. FEI Number

65-0619292

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

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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature Type and Print Name of Registered Agent and Title (Applicable)

(2025) Registered Agent signature required when terminating

Date

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTSD
BARATZ, PHILIP
2400 E. COMMERCIAL BLVD.,
FT. LAUDERDALE FL 33308

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
FREYSTATTER, GUNTHER
228 71ST STREET
MIAMI BEACH FL 33141

☐ DELETE

TITLE
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CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☒ Addition

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

, Suite 8H

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

☒ Change ☐ Addition

18090 Collins Ave. #T-14
N. Miami Beach, FL 33160

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

☐ Change ☒ Addition

Jonathan Goldstein
4101 N. 42nd Terrace
Hollywood FL 33021

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

☐ Change ☐ Addition

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Philip Baratz

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Philip Baratz

6/17/96

305-466-9200

CR2E034 (3/96)