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PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

FILED

May 05 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P96000068713 (2)

STERLING VI FLORIDA, INC.				
Principal Place of Business 209 PHIPPS PLAZA PALM BEACH FL 33480	Mailing Address 209 PHIPPS PLAZA PALM BEACH FL 33480-42	241	T 1908/1901 129 (DING QINI) ODINI ODINI ODINI AN	0165 80518 01701 10111 10001 15004 1634 1001
			3. Date Incorporated or Qualified 08/16/1996	3a. Date of Last Report
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
1	26		65-0677118	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
2] City & State	City & State		& Election Compaign Financias	Fee Required
3	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip	Country	8. This corporation has liability for	
4 25	29	30		Yes No
9. Name and Address of Cu	rrent Registered Agent		10. Name and Address of New F	legistered Agent
BROWN, MORTON P		81 Name 1	sevid Kosoy	
100 S.E. 2ND STREET			ress (P.Q. Box Number is Not Accepta	able)
17TH FLOOR		9-00	A Phipps Pla	128
MIAMI FL 33131		83	• •	
		84 City	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	85 Zip Code
11. Pursuant to the provisions of Sections 607	0000 and 607 1609. Florida Statut	To the shows named ass	11M Izeach	FL 133480
			poration submits this statement for the	i purpose of changing its registered
office or registered agent, or both, in the S	late of Florida. Such change was a	authorized by the corpora	tion's board of directors. I hereby acc	ept the appointment as registered
office or registered agent, or both in the S agent. I am familiar with and a cept the ol	itate of Florida. Such change was a bligations of, Section 607.0505, Flo	authorized by the corpora orida Statutes.	tion's board of directors, I hereby acc	ept the appointment as registered
SIGNATURE	e d			
SIGNATURE Signature in the or profited tame of registered to the control of the c	e d	authorized by the corpora prida Statutes. E: Registered Agent signature requ		DATE
SIGNATURE Signature is provided ame of registered and of FICERS TITLE PSTD	d agent and t'e if applicable (NOTI	E: Registered Agent signature requ	red when reinstating)	DATE
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