## **2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT #

P97000039762

1. Entity Name

STERLING VII FLORIDA, INC.



**FILED** Apr 25, 2003 8:00 am Secretary of State

04-25-2003 90163 044 \*\*\*158.75

Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  Country  Southing Changes  Applied For Not Applicable  \$8.75 Additional Fee Required  6. Name and Address of Current Registered Agent  Name  KOSOY, BRIAN D  ONE N CLEMATIS ST  SUITE 305  WEST PALM BEACH FL 33401  City  FL  Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Lam familiar with, and accept the obligations of registered agent and title it applicable.  Signatrun. Typed or printed name of registered agent and title it applicable.  (NOTE: Registered Agent signature required when reintataing)  DATE  FILE NOW!!! FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State  10.  OFFICERS AND DIRECTORS  11.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  DP  KOSOY, BRIAN D  SIREET ALDRESS  CITY-ST-ZPP  ONE N CLEMATIS ST, STE 305  WEST PALM BEACH FL 33401  City ST-ZPP  CHECK HERE IF MAKING CHANGES  Applied For  Not Applicable for Not Applicable  \$8.75 Additional Fee Required  Street Address (P.O. Sox Number is Not Acceptable)  Street Address (P.O. Sox Number is Not Acceptable)  City FL  Zip Code  Street Address (P.O. Sox Number is Not Acceptable)  DATE  FLE NOW!!! FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State  10.  OFFICERS AND DIRECTORS  ITILE  DP  KOSOY, BRIAN D  SIREET ALDRESS  CITY-ST-ZPP  ONE N CLEMATIS ST, STE 305  WEST PALM BEACH FL 33401	Principal Place of Business ONE N CLEMATIS ST SUITE 305 WEST PALM BEACH FL 33401  Mailing Address ONE N CLEMAT SUITE 305 WEST PALM BEACH FL 33401  Mailing Address ONE N CLEMAT SUITE 305 WEST PALM BEACH FL 33401			01		8	
City & State  Country  Street Address of Status Desired  Street Address of New Registered Agent  Name  KOSOY, BRIAN D  ONE N CLEMATIS ST  SUITE 305  WEST PALM BEACH FL 33401  City  FL  Zip Code  Street Address (P.O. Box Number is Not Acceptable)  City  FL  Zip Code  City  FL  Zip Code  Street Address (P.O. Box Number is Not Acceptable)  City  FL  Zip Code  Street Address (P.O. Box Number is Not Acceptable)  DATE  Signature, hyped or printed name of registered agent.  SIGNATURE  Signature, hyped or printed name of registered agent and other is applicable.  (NOTE: Registered Agent algoritume required when reinstating)  DATE  FILE NOW!!! FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Fiorida Department of State  10.  OFFICERS AND DIRECTORS  11.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  DP  MONE  Change   Additional Fee Required  Street Address (P.O. Box Number is Not Acceptable)  DATE  Zip Code  Street Address (P.O. Box Number is Not Acceptable)  DATE  Signature, hyped or printed name of registered agent.  Signature, hyped or printed name of registered agent and other is applicable.  (NOTE: Registered Agent algoritum required when reinstating)  DATE  Street Address (P.O. Box Number is Not Acceptable)  DATE  Signature, hyped or printed name of registered agent.  Signature, hyped or print	2. Principal Place of Business		3. Mailing Address			11 13111 (111) (111) Bilin (111) (60)	
Country   Zip   Country   Zip   Country   St. Certificate of Status Desired   \$8.75 Additional Fee Required   \$8.75 Addition	Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES		
6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  Name  KOSOY, BRIAN D  ONE N CLEMATIS ST  SUITE 305  WEST PALM BEACH FL 33401  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent and title if applicable.  SIGNATURE  FILE NOW!!! FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  DP  NOSOY, BRIAN D  ONE N CLEMATIS ST, STE 305  WEST PALM BEACH FL 33401  STREET ADDRESS  CITY-ST-ZIP  WEST PALM BEACH FL 33401	City & State		City & State		4. FEI Number 65-0748317	Applied For Not Applicable	
Name	Zip	Country	1 ' I S Cortificate of Status Desired X I YY'				
KOSOY, BRIAN D ONE N CLEMATIS ST SUITE 305 WEST PALM BEACH FL 33401 City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE NAME STREET ADDRESS CITY-ST-ZIP ONE N CLEMATIS ST, STE 305 WEST PALM BEACH FL 33401  Street Address (P.O. Box Number is Not Acceptable)  City  Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  Address (P.O. Box Number is Not Acceptable)  Tity  ITILE NOW. If FEE IS 3401  STREET ADDRESS CITY-ST-ZIP  STREET ADDRESS CITY-ST-ZIP  STREET ADDRESS CITY-ST-ZIP  Address (P.O. Box Number is Not Acceptable)  Tity Street Address (P.O. Box Number is Not Acceptable)  Tity Street Address (P.O. Box Number is Not Acceptable)  Tity Street Address (P.O. Box Number is Not Acceptable)  Tity Street Address (P.O. Box Number is Not Acceptable)  Tity Street Address (P.O. Box Number is Not Acceptable)  Tity Street Address (P.O. Box Number is Not Acceptable)  The Address (P.O. Box Number is Number	6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent		
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TITLE DP Change Addition NAME KOSOY, BRIAN D STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL 33401  TITLE NAME NAME NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP	After May 1, 2003 Fee will be \$550.00				, , ,		
NAME STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL 33401  NAME STREET ADDRESS CITY-ST-ZIP ONE N CLEMATIS ST, STE 305 WEST PALM BEACH FL 33401  NAME STREET ADDRESS CITY-ST-ZIP	10.	10. OFFICERS AND DIRECTORS 11.		11.			
	NAME STREET ADDRESS	KOSOY, BRIAN D ONE N CLEMATIS ST, STE 305	<del></del>	NAME STREET ADDRESS		☐ Change ☐ Addition	

NAME MOROSS, GREGORY S STREET ADDRESS STREET ADDRESS ONE N CLEMATIS ST, STE 305 CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33401 Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition Change ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

VSD