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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # \$77568

(1)

STERLING HOME BUILDERS, INC.

Mailing Address

417 S POLOMA PL TAMPA FL 33609

Principal Place of Business

417 S POLOMA PL TAMPA FL 33609-3711

Note: Paloma is misspelled

FILED Apr 09 1997 8:00am Secretary of State

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Note: I albara is misspelled.				3. Date Incorporated or Qualified 09/03/1991	3a. Date of Last Report 04/30/1996	
	s. Paloma Pl	2a. Mailing Address 26 417 S. Pal	oma Pl	4. FEI Number 59-3088100	Applied For Not Applicable	
Suite, Apt		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be	
Z10	Country	Zip	Country	This corporation has liability for it	<del></del>	
24 330	1201		10	Florida Statutes	Yes No	
	9. Name and Address of Curren	Registered Agent	81 Name	10. Name and Address of New Re	Jistered Agent	
417 PALOMA PLACE TAMPA FL 33809						
				82 Street Address (P.O. Box Number is Not Acceptable)		
				[63]		
			64 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						
12.	Signature Typod or printed name of registered agen OFFICERS AND		Registered Agent signature req	ADDITIONS/CHANGES TO OFFIC	DATE FRS AND DIRECTORS IN 12	
inte	D OF HOLERS AND	DELETE				
NAME	ALONSO, B. L.	<del></del>	1.2 NAME	Arrect spelling of Palom 417 S. Paloma Place	ja	
STREET ADDRESS	417 S POLOMA PL		1.3 STREET ADDRESS	417 S. Paloma Place		
CITY-ST-ZIP	TAMPA FL 33609		1.4 CITY-SY-ZIP			
TITLE		DELETE	2.1 TITLE		☐ Change ☐ Addition	
NAME			2.2 NAME			
STREET ADDRESS			2 3 STREET ADDRESS			
CITY - ST - ZIP		DELETE	2.4 CITY-ST-ZIP		Change Addition	
TITLE		FT Secret	3.2 NAME		CT piletific CT vedition	
NAME STREET ADDRESS			3.3 STREET ADDRESS		}	
CHY-ST 7IP			3.4. CITY-ST-ZIP		}	
1001		☐ DELETE	4.1 TITLE	· · · · · · · · · · · · · · · · · · ·	☐ Change ☐ Addition	
NAMÉ			4 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS		(	
CITY-SI-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		Change Addition	
NAMÉ			52 NAME		}	
STREET ADORESS			5.3 STREET ADDRESS			
CITY ST-7IP		Finerer	5.4 CITY-ST-ZIP		Change Addition	
TITLE		☐ DELETÉ	61 TITLE	•	CT Change CT Worldow )	
NAMF			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS		}	
14. I do hereb	by certify that the information supplier	I with this filing does not qualify	6.4 CITY-ST-ZIP for the exemption stat	ed in Section 119.07(3)(i), Florida Statutes	s. 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 13 if changed, or on an attachment with an address.						

SIGNATURE: Loubard

Boulage And Types on Physics Male of Signing Officer on Innection

3/3/97

(813) 286-2141

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