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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

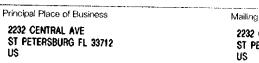
DIVISION OF CORPORATIONS

S93100 **DOCUMENT #**

(3)

FILED May 01 1996 8:00 am Secretary of State

STERLING TEMPORARIES, INC.



Mailing Address 2232 CENTRAL AVE

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U\$	DUNG FL 33/12	ST PETERSBURG FL 3	3712				
District 15					3. Date Incorporated or Qualified 11/08/1991	3a. Date of L 05/01	ast Report
2. Principai P	Principal Place of Business 2a. Mailing Address 1				4. FEI Number	L	Applied For
Suite, Apt.	# etc	26 12463 920	· lene	2C8, N.	65-0295597		Not Applicable
City & State		Su'te, Apt. #, etc. 27		5. Certificate of Status Desired		8.75 Additional Fee Required	
23		City & State 28 Seminole	FL		Election Campaign Financing Trust Fund Contribution		55.00 May Be Added to Fees
Zip	Country	Zip	Coun	try	8. This corporation has liability for in		
24	25	29 34642	30	1,S. A.	Florida Statutes Yes	□ No	
	g. Name and Address of Cur	rent Registered Agent			10. Name and Address of New Re	gistered Ager	ıt
WIGIEV	TOCHOD D		8	31 Name			
WIGLEY, TREVOR D				32 Street Addre	ess (P.O. Box Number is Not Acceptable	,	· · · · · · · · · · · · · · · · · · ·
12463 92ND TERRACE, N. SEMINOLE FL 34642				- Olicel Addit	ess (To Box Hornochis Not Acceptable	<i>=)</i>	
SEMINU	LE FL 34642		8	13			
			-	14 City			
				1 4.7		F1 65	
11. Pursuant t	to the provisions of Sections 607.05	02 and 607.1508, Florida Statute	s, the above	named corpora	ation submits this statement for the purp	ose of changing	its registered office
familiar wit	ith, and accept the obligations of, Se	ગાવા. કારણ change was authorize ∍ction 607.0505, Florida Statutes	ed by the co	rporation's board	ation submits this statement for the purp d of directors. I hereby accept the appoi	ntment as regis	tered agent. I am
SIGNATURE							
	Signature, typod or printed name of registered ag		IE Registered As	pent signature required	when reinstating)	DATE	
12.	OFFICERS A	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		CTORS IN 12
TITLE	'-	DELETE	1.1 TITL	E		☐ Cha	
NAME	WIGLEY, TREVOR D		1.2 NAM	E			• 🗀
STREET ADDRESS	12463 92ND TERRACE, N		1.3 STRE	ET ADDRESS			
CITY-ST-ZIP	SEMINOLE FL		1.4 CI7Y	-ST-ZIP			ļ
TITLE	VSTD	DELETE	2 1 1111	É			inge [] Addition
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NAME	WIGLEY, THERESA B		2.2 NAM	<u> </u>		Cha	inge Accition
name Street address	12463 92ND TERRACE, N.		2.2 NAM			∐; Gna	inge Addition
		_ order	2.2 NAM. 2.3 STRE	ET ADDRESS		∐; Cha	inge Addition
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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 signature shall have the same legal effect as if made under appears in Block 12 or Block 13 if changed, or on an attachment with an address.

4-31-96 813398-3600