

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # V03747

(5)

1. Corporation Name

STERLING NEWS AGENCY, INC.

FILED
95 AUG -3 AM 9:58
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DO NOT WRITE IN THIS SPACE.

Principal Place of Business		Mailing Address	
2175 N ANDREWS AVENUE EXT POMPANO BEACH FL 33069 US		2175 N ANDREWS AVENUE EXT POMPANO BEACH FL 33069 US	
2. Principal Place of Business		2a. Mailing Address	
21		26	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22		27	
City & State		City & State	
23		28	
Zip		Country	
24		29	
25		30	
3. Date Incorporated or Qualified		3a. Date of Last Report	
01/02/1992		08/05/1994	
4. FEI Number		Applied For	
65-0306846		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			

9. Name and Address of Current Registered Agent

AGOGUJA, MICHAEL
9701 WESTVIEW DRIVE #1423
CORAL SPRINGS FL 33078

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 typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1. TITLE	PRESIDENT ☒ Change ☐ Addition
NAME	STERLING NEWS AGENCY	12. NAME	MICHAEL AGOGUJA
STREET ADDRESS	2175 N ANDREWS AVE EXT	13. STREET ADDRESS	2175 N ANDREWS AVE EXT
CITY - ST - ZIP	POMPANO BEACH FL	14. CITY - ST - ZIP	POMPANO BEACH, FL 33069
TITLE	STD	2. TITLE	☐ Change ☐ Addition
NAME	STERLING NEWS AGENCY	22. NAME	
STREET ADDRESS	2175 N ANDREWS AVE EXT	23. STREET ADDRESS	
CITY - ST - ZIP	POMPANO BEACH FL	24. CITY - ST - ZIP	
TITLE		3. TITLE	☐ Change ☐ Addition
NAME		32. NAME	
STREET ADDRESS		33. STREET ADDRESS	
CITY - ST - ZIP		34. CITY - ST - ZIP	
TITLE		4. TITLE	☐ Change ☐ Addition
NAME		42. NAME	
STREET ADDRESS		43. STREET ADDRESS	
CITY - ST - ZIP		44. CITY - ST - ZIP	
TITLE		5. TITLE	☐ Change ☐ Addition
NAME		52. NAME	
STREET ADDRESS		53. STREET ADDRESS	
CITY - ST - ZIP		54. CITY - ST - ZIP	
TITLE		6. TITLE	☐ Change ☐ Addition
NAME		62. NAME	
STREET ADDRESS		63. STREET ADDRESS	
CITY - ST - ZIP		64. CITY - ST - ZIP	

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

SIGNATURE:

Michael Agoguja
MICHAEL AGOGUJA

PRESIDENT 8-1-95 305-468-7912

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #