

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2006 8:00 am
Secretary of State

03-13-2006 90082 017 ***150.00

DOCUMENT # P05000038407 1. Entity Name NSFL, INC.					
Principal Place of Business C/O RJS 201 SOUTH BISCAYNE BLVD. #1500 MIAMI, FL 33131			Mailing Address C/O RJS 201 SOUTH BISCAYNE BLVD. #1500 MIAMI, FL 33131		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CORPORATION COMPANY OF MIAMI 201 SOUTH BISCAYNE BOULEVARD SUITE 1500 MIAMI, FL 33131			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LINDAHL, GORAN 201 SOUTH BISCAYNE BLVD. #1500 MIAMI, FL 33131 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P/S/T ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LINDAHL, CHRISTINA 201 SOUTH BISCAYNE BLVD. #1500 MIAMI, FL 33131 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 I am empowered.					
SIGNATURE: <u>Goran Lindahl</u> Goran Lindahl, President 03/03/06 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date					

ATTACHMENT 40030034
SHUTTS
&
BOWEN #POS000038407
LLP

ATTORNEYS AND COUNSELLORS AT LAW

RAUL J. SALAS
(305) 379-9146 Direct Telephone
(305) 347-7746 Direct Facsimile

E-MAIL ADDRESS:
rsalas@shutts-law.com

March 9, 2006

Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

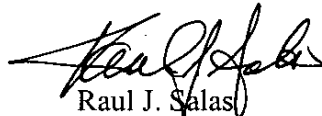
Re: NSFL, Inc.

Dear Sirs:

Enclosed is the 2006 For Profit Corporation Annual Report for NSFL, Inc., along with a check made payable to the Florida Department of State in the amount of \$150.00.

If you have any questions, please contact the undersigned.

Sincerely,



Raul J. Salas

RJS/lrp
enclosures
cc: Mr. Goran Lindahl (w/enc.) (via email)