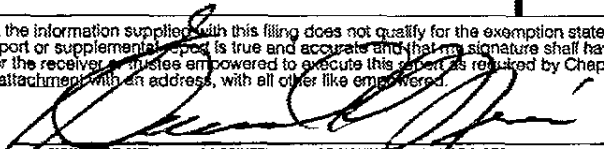


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 22, 2004 08:00 AM
Secretary of State

DOCUMENT # 608970 1. Entity Name NATIONAL SALES, INC.		
Principal Place of Business 8375 NW 56 ST. MIAMI, FL 33166 US	Mailing Address 13320 SW 110 AVE MIAMI, FL 33166 US	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent LEON, EMILIO P. 13320 S.W. 110TH AVENUE MIAMI FL, FL 33176		DO NOT WRITE IN THIS SPACE
☒ 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 _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LEON, EMILIO P 13320 SW 110TH AVE MIAMI, FL 00000, 33176	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS LEON, MAUREEN E. 13320 SW 110 AVE. MIAMI, FL 00000, 33176	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT BARR, DANIEL 8220 STATE ROAD 84 #200 DAVIE, FL 33324	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.		
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		1/20/04 Daytime Phone #



01152004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1880082	Applied For Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	

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01/22/04-80020-001 158.75