


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 05, 2006 8:00 am
Secretary of State

06-16-2006 90102 042 ***158.75

DOCUMENT # F0100000735

1. Entity Name
NEWPORT SALES, INC.




Principal Place of Business : Mailing Address
PO BOX 58 : PO BOX 58
ONE NEWPORT PLAZA : ONE NEWPORT PLAZA
FREEPORT, NY 11520 : FREEPORT, NY 11520

2. Principal Place of Business : 3. Mailing Address
 Suite, Apt. #, etc. : Suite, Apt. #, etc.

City & State : City & State

Zip : Country : Zip : Country

66021280



05162006 Chg-P CR2E034 (11/05)

4. FEI Number : Applied For
11-2636504 : Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
KLEIN, CARL M
4747 COLLINS AVE., #615
MIAMI BEACH, FL

7. Name and Address of New Registered Agent
 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$550.00 Due by September 8, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P KLEIN, CARL M ONE HEATHER LANE LAWRENCE, NY	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S SPITZ, MARILYN 377 FOREST AVENUE WOODMERE, NY	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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 information.

SIGNATURE:  **CARL M KLEIN** 6/14/06 771-4445
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

NEWPORT SALES INC. ATTACHMENT

PROMOTIONAL CLOSE-OUTS

66021280

ONE NEWPORT PLAZA
FREEPORT, NY 11520
P: (516) 771-4444
F: (516) 377-9069

TOLL FREE (800) 344-3441

230 5TH AVENUE-SUITE 1804
NEW YORK, NY 10001
P: (212) 689-1089
F: (212) 689-1579

DATE: June 28, 2006

Florida Department of State
Division Of Corporations

REF: F01000000735

Please be advised, we have received your letter regarding the additional balance that you say is due. However, on May 18th we received a letter stating you received the check for \$150 and if we need a certificate of status add the \$8.75 and to avoid late charges return within 30 days.

So on May 26th check# 31875 in the amount of \$158.75 before 30 days the check was mailed.

Please take care of this matter so the report can be filed.

Sherri Kempster

IF YOU HAVE FURTHER QUESTIONS PLEASE CALL (516) 771-4444.