

Division Dec. 14 2009 2:30 PM

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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

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Account Name : GERALD WEINBERG, P.C.  
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Email Address:

jmosse@therdgroup.com

**FOREIGN PROFIT/NONPROFIT CORPORATION  
NORTHPOINT TRADING INC.**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

09 DEC 14 PM 1:46

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December 14, 2009

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

GERALD WEINBERT, P.C.

SUBJECT: NORTHPOINT TRADING INC.  
REF: W09000054062

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

The name and title of the person signing the document must be noted beneath or opposite the signature.

If you have any further questions concerning your document, please call (850) 245-6931.

Becky McKnight  
Regulatory Specialist II  
New Filing Section

FAX Aud. #: H09000256567  
Letter Number: 609A00037941

(Dec. 14, 2009 2:30PM 015)

No. 1675 P. 3

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

**1. NORTHPOINT TRADING, INC.**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

**2. New York**

(State or country under the law of which it is incorporated)

**3. 54-2123806**

(FEI number, if applicable)

**4. 09/04/2003**

(Date of incorporation)

**5. Perpetual**

(Duration: Year corp. will cease to exist or "perpetual")

**6.**

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

**7. 347 5th Avenue, New York, NY 10016**

(Principal office address)

**347 5th Avenue, New York, NY 10016**

(Current mailing address)

**8. Wholesales sales.**

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

**9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)**

Name: **Incorporating Services, Ltd.**

Office Address: **1540 Glenway Drive**

**Tallahassee**

(City)

**Florida 31301**

(Zip code)

**10. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

**Incorporating Services, Ltd.;**

*Rence T. Kent, Assistant Secretary*  
(Registered agent's signature) **Rence T. Kent**

**11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.**

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SECRETARY OF STATE  
TALLHASSEE, FLORIDA

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AN No. 1675 P. 4  
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12. Names and business addresses of officers and/or directors:

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**A. DIRECTORS**

Chairman: \_\_\_\_\_

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: Daniel Srour

Address: 722 Avenue T

Brooklyn, NY 11223

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

**B. OFFICERS**

President: Abraham S. Kassin

Address: 465 Avenue T

Brooklyn, NY 11223

Vice President: Isaac Kassin

Address: 2090 East 5th Street

Brooklyn, NY 11223

Secretary: Morris Kassin

Address: 2118 East 5th Street, Brooklyn, NY 11223

Treasurer: Jack J. Ezon

Address: 19667 Turnberry Way, Apartment 14A, Aventura, FL 33180

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. \_\_\_\_\_

(Signature of Director or Officer listed in number 12 of the application)

14. Abraham Kassin

(Typed or printed name and capacity of person signing application)

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(Dec. 14, 2009) 2:31 PM (13)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## } SS:

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The seal of the State of New York Department of State is a circular emblem. It features a central shield with a sunburst and a plow, flanked by two female figures representing Liberty and Justice. Above the shield is an eagle with spread wings. The shield is set against a background of a wreath. The entire seal is encircled by a dotted border. The text "STATE OF NEW YORK" is arched across the top, and "DEPARTMENT OF STATE" is arched across the bottom. Two five-pointed stars separate the top and bottom text on the left and right sides.

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