

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 27 AM 7:33

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # L76495 (5)

1. Corporation Name

NORTH POINT SALES CORP.

Principal Place of Business

**150 NW 168TH ST/ - #300
NORTH MIAMI BEACH FL 33169**

Mailing Address

**150 NW 168TH ST/ - #300
NORTH MIAMI BEACH FL 33169**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

05/30/1990

3a. Date of Last Report

04/26/1994

2. Principal Place of Business

21 150 NW 168TH STREET

2a. Mailing Address

25 150 NW 168TH STREET

4. FEI Number

65-0197971

Applied For

☐ Not Applicable

Suite, Apt. #, etc.

22 SUITE 310

Suite, Apt. #, etc.

27 SUITE 310

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

City & State

23

City & State

28

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

Zip

24

Country

25

Zip

29

Country

30

8. This corporation has liability for intangible tax under § 199.032
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**STERN, JEROME, H
17071 W. DIXIE HWY.
N. MIAMI BEACH FL 33160**

10. Name and Address of New Registered Agent

81 Name

82 20805 DISCAYNE BLVD.

83

84 AVENTURA

FL

85

33180

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 fee if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

**TITLE DPT
NAME LIPSON, ARTHUR E.
STREET ADDRESS 150 NW 168TH ST. #300
CITY - ST - ZIP N. MIAMI BEACH FL 33169**

**TITLE DVS
NAME STERN, JEROME H.
STREET ADDRESS 17071 W. DIXIE HWY
CITY - ST - ZIP N. MIAMI BEACH FL 33160**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

**11 TITLE ☒ Change ☐ Addition
12 NAME
13 STREET ADDRESS 150 NW 168TH ST. #310
14 CITY - ST - ZIP**

**21 TITLE ☒ Change ☐ Addition
22 NAME
23 STREET ADDRESS 20805 DISCAYNE BLVD.
24 CITY - ST - ZIP AVENTURA, FL 33180**

**31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP**

**41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP**

**51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP**

**61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ARTHUR E. LIPSON, Pres.

Date

Signature Number #