FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

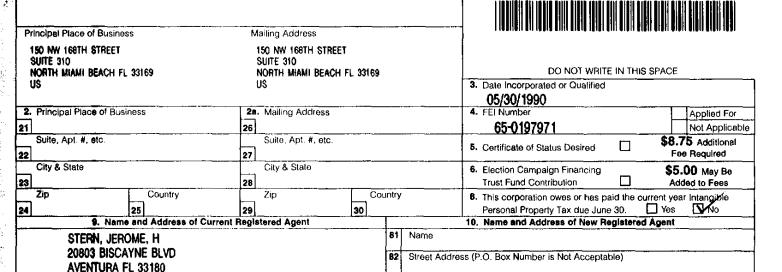
Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

(5)

NORTH POINT SALES CORP.

FILED							
May 01 1998 8:00am	1						
Secretary of State							



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. Thereby accept the appointment as registered

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agent. 1 a	m familiar with, and accept the obligations of, Se	ction 607.0505, Flor	ida Statutes.	observed bound of owners of a restrict and appointment as to	ogistored
SIGNATURE	Signature, typed or printed name of registered agent and little if app	icable (NOIF:	Registered Agent signature	required when reinstalling) DATE	[
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPT	DELETE	1.1 TITLE	Change	Addition
NAME	LIPSON, ARTHUR E.		1.2 NAME		
STREET ADDRESS	150 NW 168TH STREET SUITE 310		1.3 STREET ADDRESS		
CITY-ST-ZIP	NORTH MIAM! BEACH FL		1.4 CITY-ST-ZIP		
TITLE	DVS	DELETE	2.1 TITLE	Change	Addition
NAME	Stern, Jerome H.		2.2 NAME		ſ
STREET ADDRESS	20803 BISCAYNE BLVD		2.3 STREET ADDRESS		1
CITY-ST-ZIP	AVENTURA FL		2. 4 CITY - ST - 2IP		
TITLE		DELETE	3.1 TITLE	☐ Change	Addition
NAME			3.2 NAME		ļ
STREET ADORESS			3.3 STREET ADDRESS		1
CITY-ST-ZIP			3.4. CłTY-ST-ZiP		
TITLE		DELETE	4.1 TITLE	☐ Change	Addition
NAME			4. 2 NAME		l
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP]
TITLE		☐ DELETE	5.1 TITLE	☐ Change	Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		1
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE	☐ Change	Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		l
CITY-ST-ZIP			6.4CTTY\ST-ZIP	A	

14. 1 hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and final 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 at 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:

(305)653-2392

Zip Code

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