


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

FILED
Feb 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # M49929 (6) 1. Corporation Name NORTHERN SERVICES CORP.					
Principal Place of Business 7500 N.W. 25TH STREET 205 MIAMI FL 33122 US			Mailing Address P.O. BOX 162069 MIAMI FL 33116-2069 US		
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 04/08/1987 4. FEI Number 59-2789868 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent RIBENBOIM, MYRIAM DA COST 10940 S.W. 125TH STREET MIAMI FL 33156			10. Name and Address of New Registered Agent 81 Name Myriam C. Ribenboim 82 Street Address (P.O. Box Number is Not Acceptable) 205 Caoba Ct. 83 City C 84 City Coral Gables FL 85 Zip Code 33143		
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 title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
12. OFFICERS AND DIRECTORS TITLE PD NAME RIBENBOIM, MYRIAM DA C. STREET ADDRESS 10940 S.W. 125TH STREET CITY-ST-ZIP MIAMI FL TITLE VS NAME RIBENBOIM, PAULO A STREET ADDRESS 10940 S.W. 125TH STREET CITY-ST-ZIP MIAMI FL TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE PD 1.2 NAME Ribenboim, Myriam da C. 1.3 STREET ADDRESS 205 Caoba Ct. 1.4 CITY-ST-ZIP Coral Gables FL 33143 2.1 TITLE VS 2.2 NAME Ribenboim, Paulo A 2.3 STREET ADDRESS 131 Crandon Blvd # 834 2.4 CITY-ST-ZIP Key Biscayne FL 33149 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		



DO NOT WRITE IN THIS SPACE

CR2E034 (10/97)

14. I 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 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: Myriam Ribenboim 2/16/98 (305) 668-2007