2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2008
Secretary of State

DOCUMENT# P01000061978

Entity Name: NORTH POINT CONSULTANTS, INC.

Current Principal Place of Business:

6175 NW 153RD ST
325
MIAMI LAKES, FL 33014

New Principal Place of Business:

Current Mailing Address:

6175 NW 153RD ST
325
MIAMI LAKES, FL 33014

New Mailing Address:

FEI Number: 65-1115500 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PRITZKER, ALAN
1371 NE 172ND STREET
MIAMI, FL 33162 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTSD ( ) Delete
Name: PRITZKER, ALAN
Address: 1371 NE 172ND ST
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: VD ( ) Delete
Name: PRITZKER, BRENDA
Address: 1371 NE 172ND ST
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: V ( ) Delete
Name: MARTIN, JOSE
Address: 1260 REDBIRD AVENUE
City-St-Zip: MIAMI, FL 33166

Title: D ( ) Delete
Name: PRITZKER, MENACHEM D
Address: 1371 NE 172ND ST
City-St-Zip: NORTH MIAMI BEACH, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALAN PRITZKER PTSD 01/09/2008

Electronic Signature of Signing Officer or Director — Date