FOR PROFIT CORPORATION

FILED Jan 21, 2003 8:00 am Secretary of State

UNIFORM	BUSIN	IESS	REPORT	(UB	Ŕ
DOCUMENT # F	01000	164070)	X	_

1. Entity Name						01-21-2003 90547 028 ***158.75			
North Point Consultants, Inc.			√ -						
1	DO NOT WRITE	IN THIS S	PAC	E					
2. Principal Place of Business 3. Mailing Address 6175 NW 153rd Street 6175 NW 153rd Street		Street		_					
Suite, Apt.	#, etc.	Suite, Apt. #, etc. Suite 325				DO NOT WRITE IN THIS SPACE			
City & State		City & State Miami Lakes, FL			4. FI	65-1115500	Applied For Not Applicable		
^{Zip} 33014	Country USA	Zip 33014				5. Certificate of Status Desired S8.75 Additional Fee Required			
	·				7. Nar	ne and Address of Current Registered Ag	ent		
				Name Alan Pritzker					
***	DO NOT WI			·		(P.O. Box Number is Not Acceptable)			
	IN THIS SP	ACE				Street			
				City North Miami Beach FL Zip Code 33162			33162		
	named entity submits this statement for tions of registered agent.	the purpose of changing its	s registere	ed office or regi	stered age	ent, or both, in the State of Florida. I am famil	fiar with, and accept		
SIGNATUR	Signature, typed or printegrafine of registered agent an			tzker, Presi d Agent signature req			15, 2003		
January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State						S. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees		
10.	OFFICERS AND D					<u> </u>			
TITLE		, , ,	TITLE				(12)(03)		
NAME -	P/T/S/D - Alan Pritzker		NAM	I					
STREET ADDRESS	1371 NE 172nd Street			ET ADDRESS		•			
CITY-ST-ZIP	North Miami Beach, FL 33162		СПУ	-ST-ZIP			970		
TITLE	V/D - Brenda Pritzker		TITLE	Į.					
NAME CONTEX ADDRESS	1371 NE 172nd Street	1	NAM	ET ADDRESS			١٠		
CITY-ST-ZIP	Morth Minni Roach El 22462			-ST-ZIP					
TITLE	V'- Jose Martin		וותנ						
NAME	1260 Redhird Avenue		NAM	I					
STREET ADDRESS			-ST-ZIP		DO NOT WRITE				
TITLE	D - Menachem D. Pritzker	. All the commence of the contract of the cont	חדונ			IN THIS SPACE	E		
	1271 NE 1720d Street		NAM				_		
STREET ADDRESS CITY+ST+ZIP	North Miami Beach, FL 331	62		ET ADDRESS - ST - ZIP					
TITLE			TITLE	E					
NAME			NAM	E					
STREET ADDRESS			1	ET ADDRESS			1		
CITY-ST-ZIP			_	-ST-ZIP					
TITLE NAME			TITU! Nam	1					
STREET ADORESS				ET ADDRESS					
CITY-ST-7IP	1			-ST-7IP			•		

12. 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 report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Alan Pritzker

1/15/2003

305-362-3525