# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 29, 2004**
**Secretary of State**

DOCUMENT# P01000099337

**Entity Name:** NORTHSTAR PARTNERS, INC.

**Current Principal Place of Business:**

4171 W HILLSBURN BLVD
STE 3
COCONUT CREEK, FL 33073

**New Principal Place of Business:**

4171 W HILLSBORO BLVD
STE 3
COCONUT CREEK, FL 33073

**Current Mailing Address:**

4171 W HILLSBURN BLVD
STE 3
COCONUT CREEK, FL 33073

**New Mailing Address:**

4171 W HILLSBORO BLVD
STE 3
COCONUT CREEK, FL 33073

**FEI Number: 04-3652248** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LEVINE, RICHARD
4171 W HILLSBURN BLVD
STE 3
COCONUT CREEK, FL 33073

**Name and Address of New Registered Agent:**

LEVINE, RICHARD
4171 W HILLSBORO BLVD
STE 3
COCONUT CREEK, FL 33073

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: _____ 04/29/2004
Electronic Signature of Registered Agent — Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: STD ( ) Delete
Name: LEVINE, RICHARD S
Address: 4171 W HILLSBURN BLVD., STE 3
City-St-Zip: COCONUT CREEK, FL 33073

Title: VPD ( ) Delete
Name: SOLOMON, PAUL
Address: 4171 W HILLSBURN BLVD., STE 3
City-St-Zip: COCONUT CREEK, FL 33073

Title: PD (X) Delete
Name: LEVING, MICHAEL
Address: 4171 W HILLSBURN BLVD., STE 3
City-St-Zip: COCONUT CREEK, FL 33073

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: STD (X) Change ( ) Addition
Name: LEVINE, RICHARD S
Address: 4171 W. HILLSBORO BLVD., STE 3
City-St-Zip: COCONUT CREEK, FL 33073

Title: VPD (X) Change ( ) Addition
Name: SOLOMON, PAUL
Address: 4171 W. HILLSBORO BLVD., STE 3
City-St-Zip: COCONUT CREEK, FL 33073

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PAUL SOLOMON VPD 04/29/2004
Electronic Signature of Signing Officer or Director — Date