
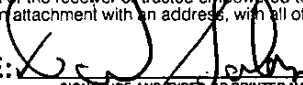


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2005 8:00 am
Secretary of State

04-08-2005 90068 010 ***150.00

DOCUMENT # P01000099337 1. Entity Name NORTHSTAR PARTNERS, INC.																											
Principal Place of Business 4171 W HILLSBORO BLVD STE 3 COCONUT CREEK, FL 33073		Mailing Address 4171 W HILLSBORO BLVD STE 3 COCONUT CREEK, FL 33073																									
2. Principal Place of Business 6331 NW 93 Ave Drive		3. Mailing Address 6331 NW 93 Ave Drive																									
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 																									
City & State Parkland 33067		City & State Parkland, FL																									
Zip FL 33067		Zip 33067																									
Country Braunland		Country Braunland																									
4. FEI Number 04-3652248		Applied For <input type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent - LEVINE, RICHARD 4171 W HILLSBORO BLVD STE 3 COCONUT CREEK, FL 33073		7. Name and Address of New Registered Agent - Name PAUL SOLOMON Street Address (P.O. Box Number is Not Acceptable) 6331 NW 93 Ave Drive City Parkland FL Zip Code 33067																									
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE:  V.P. DATE: 4/1/05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees																									
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 80%;">STD</td> <td style="width: 10%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>LEVINE, RICHARD S</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>4171 W. HILLSBORO BLVD., STE 3</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>COCONUT CREEK, FL 33073</td> <td></td> </tr> </table>		TITLE	STD	<input type="checkbox"/> Delete	NAME	LEVINE, RICHARD S		STREET ADDRESS	4171 W. HILLSBORO BLVD., STE 3		CITY-ST-ZIP	COCONUT CREEK, FL 33073		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 80%;">STD</td> <td style="width: 10%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>LEVINE, RICHARD S</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>4171 W. HILLSBORO BLVD., STE 3</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>COCONUT CREEK, FL 33073</td> <td></td> </tr> </table>		TITLE	STD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	LEVINE, RICHARD S		STREET ADDRESS	4171 W. HILLSBORO BLVD., STE 3		CITY-ST-ZIP	COCONUT CREEK, FL 33073	
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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 Block 11 if changed, or on an attachment with an address, with all other like empowered.																											
SIGNATURE:  V.P.		Date: 4/1/05 Daytime Phone #: 954-540-6609																									