## 2006 FOR PROFIT CORPORATION

## Apr 03, 2006 08:00 AM Secretary of State **ANNUAL REPORT** DOCUMENT # P02000039634 1. Entity Name NORTHSTAR SALES & ENGINEERING, INC. Principal Place of Business Mailing Address 6508 THOMAS JEFFERSON CT 6508 THOMAS JEFFERSON CT NAPLES, FL 34108 NAPLES, FL 34108 03162006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 02-0587151 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FILINGS, INC. DO NOT WRITE 3732 N.W. 16TH STREET FT. LAUDERDALE, FL 33311-4132 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 15 \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME SHANLEY, PETER M STREET ADDRESS 6508 THOMAS JEFFERSON CT CITY-ST-ZIP NAPLES, FL 34108 TITLE UÜÜ000488223 NAME 04/14/06-80027-005 150.00 STREET AUGRESS CITY-ST-ZIP TITLE STREET ADORESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the Information indicated on this report or supplymental 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 or an attachning their enactives with all other like expowered.

SIGNATURE:

STREET ADDRESS CATY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

OR DIRECTOR

FILED

SHANLEY ETER