

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000077044

Entity Name: N P M, INC.

FILED
Apr 20, 2005
Secretary of State

Current Principal Place of Business:

16 SOUTHERN CROSS CIRCLE
207
BOYNTON BEACH, FL 33436

New Principal Place of Business:

Current Mailing Address:

16 SOUTHERN CROSS CIRCLE
207
BOYNTON BEACH, FL 33436

New Mailing Address:

FEI Number: 65-1197746

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEDINA, PABLO A
16 SOUTHERN CROSS CIRCLE
#207
BOYNTON BEACH, FL 33436 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: D () Delete
Name: MEDINA, PABLO A
Address: 16 SOUTHERN CROSS CIRCLE #207
City-St-Zip: BOYNTON BEACH, FL 33436

Title: D () Delete
Name: BUJNAROWSKI, NORMA E
Address: 16 SOUTHERN CROSS CIRCLE #207
City-St-Zip: BOYNTON BEACH, FL 33436

Title: D () Delete
Name: BUJNAROWSKI, NESTOR
Address: 4200 COMMUNITY DRIVE #1110
City-St-Zip: WEST PALM BEACH, FL 33409

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:

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: MEDINA, PABLO A

D

04/20/2005

Electronic Signature of Signing Officer or Director

Date