2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

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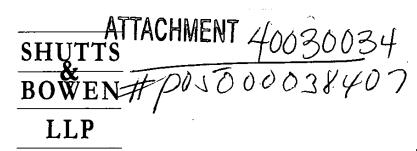
Mar 13, 2006 8:00 am Secretary of State DOCUMENT # P05000038407 03-13-2006 90082 017 ***150.00 1. Entity Name NSFL. INC. Principal Place of Business Mailing Address quysuu-201 SOUTH BISCAYNE BLVD. #1500 201 SOUTH BISCAYNE BLVD. #1500 MIAMI, FL 33131 MIAMI, FL 33131 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03022006 CR2E034 (11/05) City & State City & State 4. EEL Number Applied For 20-2541498 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATION COMPANY OF MIAMI Street Address (P.O. Box Number is Not Acceptable) 201 SOUTH BISCAYNE BOULEVARD **SUITE 1500** MIAMI, FL 33131 City Zip Code FL 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 SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. X Xx hange D/P/S/T Addition TITLE ☐ Delete TITLE LINDAHL, GORAN NAME NAME 201 SOUTH BISCAYNE BLVD. #1500 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33131 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE LINDAHL, CHRISTINA NAME NAME STREET ADDRESS 201 SOUTH BISCAYNE BLVD. #1500 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33131 CITY-ST-ZIP TITLE ☐ Defete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing goes not quality for the exemptions contained in Chapter 119, 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 of execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

Goran Lindahl,

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

305-379-9146



ATTORNEYS AND COUNSELLORS AT LAW

RAUL J. SALAS (305) 379-9146 Direct Telephone (305) 347-7746 Direct Facsimile E-MAIL ADDRESS: rsalas@shutts-law.com

March 9, 2006

Florida Department of State Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

Re: NSFL, Inc.

Dear Sirs:

Enclosed is the 2006 For Profit Corporation Annual Report for NSFL, Inc., along with a check made payable to the Florida Department of State in the amount of \$150.00.

If you have any questions, please contact the undersigned.

Sincerely,

Raul J. Salas()

RJS/lrp enclosures

cc: Mr. Goran Lindahl (w/enc.) (via email)

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