


**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 04, 2008 08:00 A**  
**Secretary of State**

<b>DOCUMENT # P05000038407</b> 1. Entity Name NSFL, INC.	
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Principal Place of Business C/O RIS 201 SOUTH BISCAYNE BLVD. #1500 MIAMI, FL 33131	Mailing Address C/O RIS 201 SOUTH BISCAYNE BLVD. #1500 MIAMI, FL 33131
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<b>DO NOT WRITE IN THIS SPACE</b>
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01032008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-2541498	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  CORPORATION COMPANY OF MIAMI 201 SOUTH BISCAYNE BOULEVARD SUITE 1500 MIAMI, FL 33131
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST LINDAHL, GORAN 201 SOUTH BISCAYNE BLVD. #1500 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LINDAHL, CHRISTINA 201 SOUTH BISCAYNE BLVD. #1500 MIAMI, FL 33131
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<p>U000000315246 02/14/08-80001-018 150.00</p> <p><b>DO NOT WRITE IN THIS SPACE</b></p>
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12. I hereby certify that the information supplied with this filing does not qualify 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 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
<b>SIGNATURE:</b> <u>Goran Lindahl</u> <b>Goran Lindahl, President</b> <u>Jan 27, 2008</u> <u>(305) 379-9146</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>