

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000040152

Entity Name: NW 43RD ST, INC.

FILED  
Apr 28, 2009  
Secretary of State

**Current Principal Place of Business:**

7560 NW 43RD STREET  
MIAMI, FL 33166

**New Principal Place of Business:**

**Current Mailing Address:**

7560 NW 43RD STREET  
MIAMI, FL 33166

**New Mailing Address:**

PO BOX 522775  
MIAMI, FL 33152

FEI Number: 32-0144414

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

ADER, ROBERT ESQ.  
100 S.E. 2ND STREET, SUITE 3550  
MIAMI, FL 33131 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: LYCKE, TIMOTHY  
Address: 272 PAYNE DRIVE  
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: D ( ) Delete  
Name: WHELLER, CHRISTOPHER  
Address: 5310 114TH AVE, UNIT 201  
City-St-Zip: DORAL, FL 33178

Title: D ( ) Delete  
Name: ENGLEMAN, LEWIS  
Address: 1880 SOUTH TREASURE DR. UNIT 3P  
City-St-Zip: NORTH BAY VILLAGE, FL 33141

**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 exemption stated 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 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: LEWIS M. ENGLEMAN

TRS

04/28/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date