2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# P08000017314

Entity Name: NORTHPOINT SYSTEMS INC.

Current Principal Place of Business:

16330 NW 48TH AVE
HIALEAH, FL 330146417

New Principal Place of Business:

Current Mailing Address:

16330 NW 48TH AVE
HIALEAH, FL 330146417

New Mailing Address:

FEI Number: 35-2326959 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WAYNE, GEOFFREY M
1201 BRICKELL AVE STE 220
MIAMI, FL 331313207 US

Name and Address of New Registered Agent:

ROARK, MONAHAN R CPA
2519 GALIANO STREET SUITE
SUITE 703
CORAL GABLES, FL 33134 US

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: ROARK R. MONAHAN 04/16/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: COOPER, NORMAN
Address: 16330 NW 48TH AVE
City-St-Zip: HIALEAH, FL 330146417

Title: VPD ( ) Delete
Name: WAISBERG DE COOPER, ADELA
Address: 16330 NW 48TH AVE
City-St-Zip: HIALEAH, FL 330146417

Title: SD ( ) Delete
Name: COOPER, VANESSA
Address: 16330 NW 48TH AVE
City-St-Zip: HIALEAH, FL 330146417

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: NORMAN COOPER PD 04/16/2009
Electronic Signature of Signing Officer or Director Date