

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90500 002 ***150.00

DOCUMENT # P95000027434

1. Entity Name
NORTHSTAR ACQUISITION, CORP.



Principal Place of Business
**5855 PADDINGTON WAY
BOCA RATON FL 33496**

Mailing Address
**5855 PADDINGTON WAY
BOCA RATON FL 33496**



2. Principal Place of Business

700 SOUTH FEDERAL HWY

3. Mailing Address

700 SOUTH FEDERAL HWY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 200 (LBS)

SUITE 200 (LBS)

City & State

City & State

BOCA RATON, FL

BOCA RATON FL

Zip

Country

Zip

Country

33432

USA

33432

USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0571509**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**STEINBERG, LAWRENCE
5855 PADDINGTON WAY
BOCA RATON FL 33496**

Name

Street Address (P.O. Box Number is Not Acceptable)

700 SOUTH FEDERAL HWY, SUITE 200

City

BOCA RATON

FL

Zip Code

33432

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 **LAWRENCE B. STEINBERG**
Signature, type or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/15/03

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **GREENSPOON, WARREN**
STREET ADDRESS **5804 N.W. 35TH WAY**
CITY-ST-ZIP **BOCA RATON FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **STD** ☐ Delete
NAME **STEINBERG, LAWRENCE**
STREET ADDRESS **5855 PADDINGTON WAY**
CITY-ST-ZIP **BOCA RATON FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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.

SIGNATURE:

LAWRENCE B. STEINBERG - SECRETARY **4/15/03** **(561) 393-5660**
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (10/02)