2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 23, 2007 08:00 AM **DOCUMENT # P96000000835 Secretary of State** N.L. ADVISORS, INC. Principal Place of Business Mailing Address 4928 NW 84 ROAD 4928 NW 84 ROAD CORAL SPRINGS, FL 33067 CORAL SPRINGS, FL 33067 CR2E034 (11/05) 02102007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0635560 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KARABEL, SIDNEY DO NOT WRITE 4928 NW 84 ROAD CORAL SPRINGS, FL 33067 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) 03/02/07-80069-005 150.00 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE KARABEL, SIDNEY M MR NAME 4928 NW 84 ROAD STREET ADDRESS CITY - ST - ZIP CORAL SPRINGS, FL 33067 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE

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 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; the 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. changed, or on an attachment with an address

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR