

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000044831

FILED  
Apr 15, 2009  
Secretary of State

Entity Name: NORTHLAKE STATION, INC.

## Current Principal Place of Business:

165 US HWY 1  
NORTH PALM BEACH, FL 33408 US

## New Principal Place of Business:

## Current Mailing Address:

18319 W. DIXIE HIGHWAY  
SUITE 204  
MIAMI, FL 33160 US

## New Mailing Address:

FEI Number: 65-0723426      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ENRIQUE, BEHAR  
18319 W. DIXIE HIGHWAY  
SUITE 204  
MIAMI, FL 33160 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: P/D ( ) Delete  
Name: BEHAR, ENRIQUE  
Address: 18319 W. DIXIE HIGHWAY  
City-St-Zip: MIAMI, FL 33160

Title: D (X) Delete  
Name: KRISTALL, MARK  
Address: 18319 W. DIXIE HIGHWAY  
City-St-Zip: MIAMI, FL 33160

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ANDREW A. OSTROW

ATTY

04/15/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date