2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V55931

2001 UNIFORM BUSINESS REPORT (UBR)						FILED						
DOCUMENT # V55931						May 02, 2001 8:00 am Secretary of State						
NORTHGATE FINANCING, INC.					05-02-2001 90186 048 ***158.75							
NOMM	itte (manoma, mo.					,	33-02-200	1 20160 (740	136.7	J	
Principal Place of Business Mailing Address				i								
515 N. FLAGLE	IER AND ASSOC., P.A. R DR. STE. 910 FACH FL 33401-4325	DARYL B CRAMER AND ASSOC., P.A. 515 N. FLAGLER DR. STE. 910 WEST PALM BEACH FL 33401-4325 US										
2. Principal P	lace of Business	3. Mailing Address										
o Daryl	Cramer & Assoc., P.A.	c/o Daryl Cramer & Assoc., F			Α. "	16 11 4 11661 1	ECIEL EXICE FECER	trige ti a t actit	acact acatt	OLDER DEGE	QUALL LOUG	
Suite, Apt.	·	Suite, Apt. #, etc.					DO NOT V	VRITE IN TH	IIS SPAC	Έ		
515 N. City & Stat	Flagler Dr., Ste. 910	515 N. Flagler Dr., Ste. 910 City & State			4. EFI1	Number	CE 00400	264		I Ap	plied For	
	lm Beach, FL	West Palm Beach, FL			4. FEI Number 65-0349961 Applied For Not Applicable							
Zip Country 33401 USA		Zip Country USA			5. Certificate of Status Desired \$8.75 Additional Fee Required							
	6. Name and Address of Current R	egistered Agent			7. Nam	e and Ad	dress of Ne	w Registere	ed Agen	t		
DARY 515 I STE.	Name Daryl Cramer & Associates, P.A. Street Address (P.O. Box Number is Not Acceptable) 515 N. Flagler Drive, Suite 910											
WES	PALM BEACH FL 33401-4325		City			m Bea	•	F		Zip Code		
8. The above	named entity submits this statement for Dary1	B. Cramer,	egistered office or Presion Registered Agent signature	dent_			in the State o	f Florida.	E			
Tax filing r	oration is eligible to satisfy its Intangible equirement and elects to do so. ia on back)	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of Stat			te 10. Election Campaign Financing							
11.	OFFICERS AND D	IRECTORS	12.		ADDIT	ONS/CH	IANGES TO (OFFICERS A				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MYERS, WILLIAM P 9030 LESLIE ST STE 308 RICHMOND HILL, ONT., CANADA	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	·					Ц	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD LUCCHESE, FABRIZIO 9030 LESLIE ST STE 308 RICHMOND HILL, ONT., CANADA	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP							Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	THOUSAND THEE, ONT., ONLY	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP							Change	Addition	
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TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS	l	<u>.</u>					Change	Addition	

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

Delete

905-882-1212

☐ Addition

☐ Change