

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000008654

Entity Name: NORTHSTAR HEALTH CORP.

Current Principal Place of Business:

800 JEFFREY ST.
#407
BOCAL RATON, FL 33487

Current Mailing Address:

800 JEFFREY ST. #407
BOCA RATON, FL 33487

FEI Number: 27-1793139

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHADER, MARK ADR.
800 JEFFREY ST.
#407
BOCA RATON, FL 33487 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title PSD
Name SHADER, MARK ADR.
Address 800 JEFFERY STREET
407
City-State-Zip: BOCA RATON FL 33487

I hereby 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 all other like empowered.

SIGNATURE: MARK SHADER

PRESIDENT

04/10/2015

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date