

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000067848

FILED
Feb 25, 2002 8:00 AM
Secretary of State

Entity Name: NAHNE ENTERPRISES, INC.

Current Principal Place of Business:

% SSI ACCOUNTING AND TAX SERVICE INC.
1500 COLONIAL BLVD., #235
FT. MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

% SSI ACCOUNTING AND TAX SERVICE INC.
1500 COLONIAL BLVD., #235
FT. MYERS, FL 33907

New Mailing Address:

FEI Number: 52-2146797 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHMITZ, WERNER
% SSI ACCOUNTING AND TAX SERVICE INC
1500 COLONIAL BLVD., #235
FT. MYERS, FL 33907 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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SCHMIDT, PETER
Address: C/O 1634 MAIN STREET
City-St-Zip: SARASOTA, FL

Title: DV () Delete
Name: SCHMIDT, BARBARA
Address: C/O 1634 MAIN STREET
City-St-Zip: SARASOTA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SCHMIDT, PETER
Address: C/O SSI 1500 COLONIAL BLVD. SUITE 235
City-St-Zip: FORT MYERS, FL 33907

Title: DV (X) Change () Addition
Name: SCHMIDT, BARBARA
Address: C/O SSI 1500 COLONIAL BLVD. SUITE 235
City-St-Zip: FORT MYERS, FL 33907

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PETER SCHMIDT

DP

02/25/2002

Electronic Signature of Signing Officer or Director

_____ Date