

**2014 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P00000050480

**Entity Name:** ND ASSOCIATES, INC.

**Current Principal Place of Business:**

719 SW 5 ST  
CAPE CORAL, FL 33991

**Current Mailing Address:**

719 SW 5 ST  
CAPE CORAL, FL 33991 US

**FEI Number:** 65-1012887

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

PITA, NIBALDO PD  
719 SW 5 ST  
CAPE CORAL, FL 33991 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 PD  
Name PITA, NIBALDO PD  
Address 719 SW 5 ST  
City-State-Zip: CAPE CORAL FL 33991

*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:** NIBALDO PITA

**PRESIDENT**

**03/21/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date