

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000019112

**Entity Name:** N.N.E. INC.

**Current Principal Place of Business:**

15673 SOUTHERN BLVD  
#110  
LOXAHATCHEE, FL 33470

**Current Mailing Address:**

15673 SOUTHERN BLVD  
#110  
LOXAHATCHEE, FL 33470 US

**FEI Number:** 81-1672993

**Certificate of Status Desired:** No

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

MENDELSON, DEBRA  
35880 NW 4TH DR  
OKEECHOBEE, FL 34972 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            PRES  
Name            HAMPSON, EDWARD  
Address        15673 SOUTHERN BLVD  
                  #110  
City-State-Zip: LOXAHATCHEE FL 33470

Title            VP  
Name            MASSIMO, NICK  
Address        18602 - 91ST PLACE N  
City-State-Zip: LOXAHATCHEE FL 33470

*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:** EDWARD HAMPSON

**PRES**

**01/18/2017**

Electronic Signature of Signing Officer/Director Detail

Date