

**2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000000550

**Entity Name:** NAS INSURANCE SERVICES, INC.

**Current Principal Place of Business:**

16501 VENTURA BLVD #200  
ENCINO, CA 91436

**Current Mailing Address:**

16501 VENTURA BLVD #200  
ENCINO, CA 91436

**FEI Number: 95-3952981**

**Certificate of Status Desired: No**

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

C T CORPORATION SYSTEM  
C/O C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 D  
Name ROBIN, EDWARD B  
Address 16501 VENTURA BLVD #200  
City-State-Zip: ENCINO CA 91436

Title P  
Name ROBIN, RICHARD J  
Address 16501 VENTURA BLVD #200  
City-State-Zip: ENCINO CA 91436

Title S  
Name LINHARDT, JILL S  
Address 16501 VENTURA BLVD #200  
City-State-Zip: ENCINO CA 91436

*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: RICHARD JOSEPH ROBIN**

**CEO**

**01/07/2013**

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

\_\_\_\_\_  
Date