

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F12000004619

**Entity Name:** SES ADVISORS, INC.

**Current Principal Place of Business:**

10959 COUNTRYWAY BLVD.  
TAMPA, FL 33626

**FILED**  
**Jan 16, 2018**  
**Secretary of State**  
**CC0561509469**

**Current Mailing Address:**

10959 COUNTRYWAY BLVD.  
TAMPA, FL 33626

**FEI Number: 04-3760707**

**Certificate of Status Desired: No**

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

NRAI SERVICES, INC.  
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 CP  
Name STEIKER, JAMES G  
Address 555 CITY AVENUE  
SUITE 910  
City-State-Zip: BALA CYNWYD PA 19004

Title VC  
Name MONACO, LOUIS JR.  
Address 555 CITY AVENUE  
SUITE 910  
City-State-Zip: BALA CYNWYD PA 19004

Title D  
Name HUMPHREY, JOHN  
Address 555 CITY AVENUE  
SUITE 910  
City-State-Zip: BALA CYNWYD PA 19004

Title D  
Name URSPRUNG, CECIL  
Address 555 CITY AVENUE  
SUITE 910  
City-State-Zip: BALA CYNWYD PA 19004

*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: JAMES STEIKER**

**PRESIDENT**

**01/16/2018**

Electronic Signature of Signing Officer/Director Detail

Date