

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000002449

Entity Name: NATION SAFE DRIVERS SERVICES, INC.**Current Principal Place of Business:**800 YAMATO ROAD
SUITE 100
BOCA RATON, FL 33431**Current Mailing Address:**800 YAMATO ROAD
SUITE 100
BOCA RATON, FL 33431**FEI Number:** 47-1016090**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**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 | PRESIDENT, TREASURER, DIRECTOR |
| Name | SMITH, ANDREW |
| Address | 800 YAMATO ROAD #100 |
| City-State-Zip: | BOCA RATON FL 33431 |

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|-----------------|----------------------|
| Title | SECRETARY |
| Name | SMITH, LAUREN |
| Address | 800 YAMATO ROAD #100 |
| City-State-Zip: | BOCA RATON FL 33431 |

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|-----------------|------------------------------|
| Title | DIRECTOR |
| Name | SMITH, MICHAEL |
| Address | 800 YAMATO ROAD SUITE 100 |
| City-State-Zip: | BOCA RATON FL 33431 |

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|-----------------|------------------------------|
| Title | DIRECTOR |
| Name | ESPOSITO, FRANK |
| Address | 800 YAMATO ROAD SUITE 100 |
| City-State-Zip: | BOCA RATON FL 33431 |

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|-----------------|------------------------------|
| Title | DIRECTOR |
| Name | HENRY, ROBERT |
| Address | 800 YAMATO ROAD SUITE 100 |
| City-State-Zip: | BOCA RATON FL 33431 |

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|-----------------|------------------------------|
| Title | DIRECTOR |
| Name | MORRIS, STUART |
| Address | 800 YAMATO ROAD SUITE 100 |
| City-State-Zip: | BOCA RATON FL 33431 |

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: ANDREW SMITH**PRES****01/17/2017**

Electronic Signature of Signing Officer/Director Detail

Date