

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 01 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L56545

(1)

1. Corporation Name

NANSEP CORPORATION

Principal Place of Business

~~800 OCEAN DR~~
~~STE PHH~~
~~JUNO BEACH FL 33408~~
US

Mailing Address

~~800 OCEAN DR~~
~~STE PHH~~
~~JUNO BEACH FL 33408~~
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/08/1990

4. FEI Number

65-0175207

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 3452 W Boynton Beach Blvd

Suite, Apt. #, etc.

22 Suite 2

City & State

23 Boynton Beach FL

Zip

24 33436

Country

25 US

2a. Mailing Address

26 3452 W Boynton Beach Blvd

Suite, Apt. #, etc.

27 Suite 2

City & State

28 Boynton Beach FL

Zip

29 33436

Country

30 US

9. Name and Address of Current Registered Agent

O'HARA, PATRICK M.
324 DATURA STREET
SUITE 100
WEST PALM BEACH FL 33401

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DVS ☐ DELETE

NAME SEPPALA, NANCY
STREET ADDRESS ~~800 OCEAN DR STE PHH~~
CITY-ST-ZIP ~~JUNO BEACH FL~~

TITLE DPT ☐ DELETE

NAME SEPPALA, MARTIN H.
STREET ADDRESS ~~800 OCEAN DR STE PHH~~
CITY-ST-ZIP ~~JUNO BEACH FL~~

TITLE V ☐ DELETE

NAME SARKELA, RODNEY
STREET ADDRESS ~~800 OCEAN DR STE PHH~~
CITY-ST-ZIP ~~LANTANA FL~~

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

3452 W Boynton Beach Blvd STE 2
Boynton Beach FL 33436

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3452 W Boynton Beach Blvd STE 2
Boynton Beach FL 33436

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

3452 W Boynton Beach Blvd STE 2
Boynton Beach FL 33436

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the register or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (10/97)