

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 10, 2002 8:00 am
Secretary of State

05-19-2002 90058 005 ***150.00

DOCUMENT # P01000095166

1. Entity Name

NSS ENTERPRISES, INC.

Principal Place of Business

**830 12TH AVE S
 NAPLES FL 34102**

Mailing Address

**830 12TH AVE S
 NAPLES FL 34102**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3749561

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

HOLCHER, MAX A

**1000 9TH ST, NORTH, SUITE 502
 NAPLES FL 34102**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when re-registering)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (See criteria on back.) ☐

FILE NOW!!! FEE IS \$150.00

After May 1, 2002 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	Pres.	☐ Delete
NAME	Eric Klopff	
STREET ADDRESS	830 12th Ave S.	
CITY - ST - ZIP	Naples, FL 34102	
TITLE	VP	☐ Delete
NAME	Wanda Klopff	
STREET ADDRESS	830 12th Ave S.	
CITY - ST - ZIP	Naples, FL 34102	
TITLE	S	☐ Delete
NAME	Wanda Klopff	
STREET ADDRESS	830 12th Ave S.	
CITY - ST - ZIP	Naples, FL 34102	
TITLE	T	☐ Delete
NAME	Max A. Holder	
STREET ADDRESS	1000 Tamiami Trail N., Ste. 502	
CITY - ST - ZIP	Naples, FL 34102	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. 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 report or supplemental 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other the employees.

SIGNATURE:

Max A. Holder

4.24.2002