## 2-14-4-1 B-1923 C FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## 1997 DOCUMENT # P93000042954 (6)

NANSEP2 CORPORATION

Princip	oat I	Place	Of	Business
13901	HS	HWY	O	JF .

STE ONE JUNO BCH FL 33408 Mailing Address

13901 US HWY ONE

STE ONE JUNO BEACH FL 33408-1613

**FILED** Feb 14 1997 8:00am Secretary of State



2. Principal Place of Business 21 800 0CEAN DRIVE 26 800 0CEAN DRIVE 26 800 0CEAN DRIVE 65-0429807  Suite. Apr. #, etc. 22 STE PH 1  City & State 23 JUN 0 BEACH FL 28 JUN 0 BEACH FL 28 JUN 0 BEACH FL 29 Zip 3 3 1400 Country  Country  Country  Country  28 Mailing Address  800 0CEAN DRIVE 65-0429807  Suite, Apt. #, etc. 27 STE PH 1  City & State  City & State  28 JUN 0 BEACH FL 28 State 29 State 29 State 29 State 20 Country  Country  80 Country  80 Country  State Country  Country  80 Election Campaign Financing Trust Fund Contribution  Country  80 DRIVE 65-0429807  Not Applied For Not Applied Fo	US			3. Date incorporated or Qualified 06/10/1993 94. Date of Last Report 04/24/1996						
Suite Audinos Signer Additions  Suite Audinos Signer Additions  Suite Audinos Signer Additions  Suite Additi	2. Principal Pl	ace of Business 2a. Mailing Address	vi monic	4. FEI Number Applied For						
Fee Required   Fee		OCEAN PRIVE 26 800 OCEA	IN NETNE							
Added to Fees   Added to Fee		N, etc. Suite, Apt. #, etc. 27 STE PH 2								
2   2   3   4   6   6   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196   196	1 . 4 . 4	NO BEACH FL 28 JUNO BZ	EACH PL	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees						
9. Name and Address of Current Registered Agent  OHARA, PATRICK M 324 DATURA ST STE 100  W PALM BCH FL 33401  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City  FL 85 Zip Code  64 City  FL 85 Zip Code  65 City  FL 85 Zip Code  66 City  FL 85 Zip Code  67 City  FL 85 Zip Code  67 City  FL 85 Zip Code  68 City  FL 86 Zip Code  68 City Flore Corporation submits this statement for the purpose of changing its registered agent larn familiant with, and cacept the obligations of. Section 67 5066, Florida Statutes  89 Corporation submits this statement for the purpose of changing its registered agent larn familiant with, and cacept the obligations of. Section 67 5066, Florida Statutes  FL 80 Zip Code  69 Zip Code  60 Zip Code  61 Zip Code  62 Zip Code  63 Zip Code  64 Zip Code  64 Zip Code  65 Zip Code  66 Zip Code  67	7 <sub>in</sub>	Country 7.0 -	Country	8. This corporation has liability for intangible tax under s. 199.032,						
O'HARA, PATRICK M 324 DATURA ST STE 100 W PALM BCH FL 33401  82 Street Address (P.O. Box Number is Not Acceptable)  83 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 607,0502 and 607 1508, Florida Statutes, the above-handed corporation submits this atlatement for the purpose of changing its registered office or registered agont, or both, in the State of Honds Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agont, or both, in the State of Honds Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agont, or both, in the State of Honds Statutes. The above hand of directors. I hereby accept the appointment as registered office or registered agont, or both, in the State of Honds Statutes. The above hand of directors. I hereby accept the appointment as registered office or registered agont, or both, in the State of Honds Statutes. The Addition is a state of Honds Statutes. The Addition State of Honds Statutes. The Addition State of Addition State of Honds State of Ho	24 33	$908_{25}$ $0 > 29 3 > 909_{30}$	109							
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STE 100 W PALM BCH FL 33401  83 84 City FL 85 Zip Code  11. Pursuent to the provisions of Section 607 0502 and 607 1508. Florida Statutes, the above-hamed corporation aubmits this statement for the purpose of changing its registered agent of an above view, or both, inch accept the suppliment as registered agent of an above view, or both, and accept the suppliment as registered agent of an above view, and accept the suppliment as registered agent of an above view, and accept the suppliment as registered agent of an above view to provide when the obligations of Section 607 0506. Florida Statutes  SIGNAT UNE  12. OFTICERS AND DIRECTORS  SIRKET ADDRESS  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  1.3 SIRRET ADDRESS  SIRKET ADDRESS  SIRKET ADDRESS  SIRKET ADDRESS  2.2 NAME  2.2 NAME  2.2 NAME  2.2 NAME  2.2 NAME  2.3 SIRRET ADDRESS  SIRRET ADDRESS  SIRRET ADDRESS  CITY-SI-7P  THE  DELETE  4.1 TITLE  Change  Addition  NAME  SIRRET ADDRESS  SIR			ress (P.O. Box Number is Not Acceptable)							
STE 100 W PALM BCH FL 33401  83  84 City FL 85 Z/O Code  11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent an analysis with, and accept the obligations of, Section 607 505.6 Florida Statutes  SIGNATURE Spatial type of preter from of ingrino a park and the 4 spatial fine of 7505.6 Florida Statutes  SIGNATURE Spatial type of preter from of ingrino a park and the 4 spatial fine  PSTD OFTICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  PSTD SARKELA, RODNEY 13901 US HWY ONE, SUITE ONE 13. STREET ADDRESS SIRRET ADDRESS SIRRET ADDRESS SIRRET ADDRESS SIRRET ADDRESS CITY-S1-79  1016  DELETE 21 THE 22 NAME 22 NAME 22 NAME 22 NAME 23 SIRRET ADDRESS CITY-S1-79  1016  DELETE 41 THE 22 NAME 43 STREET ADDRESS CITY-S1-79  1016  DELETE 41 THE 22 NAME 43 STREET ADDRESS CITY-S1-79  1016  DELETE 41 THE 22 NAME 43 STREET ADDRESS CITY-S1-79  1017  1018  DELETE 41 THE 22 NAME 43 STREET ADDRESS CITY-S1-79  1019 DELETE 41 THE 22 NAME 43 STREET ADDRESS SIRRET ADDRESS CITY-S1-79  1016  DELETE 41 THE 41 THE 42 CHANGES CITY-S1-79  1017  1018  DELETE 41 THE 41 THE 42 CHANGES CITY-S1-79  1018  DELETE 51 THE 52 NAME 53 STREET ADDRESS SIRRET ADDR	324	DATURA ST								
### City ### 15 Zip Codo  ### 1. 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 agont, 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 agont a manufair with, and accept the obligations of Section 607 0506, Florida Statutes  #### 12. OFFICEIS AND DIRECTORS  ### 12. OFFICEIS AND DIRECTORS  ### 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ### 12. PSTD  ### 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ### 12. PSTD  ### 13. STREET ADDRESS  ### 14. Change	STE	100								
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Signature, layer for printed frame of regressed specified printed layers and that displaces in CNOTE Registered Apprint operator recysted valves intentiating)   DATE	office or registered agent, or both, in the State of Florida. Such charge 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.									
TITLE NAME NAME SIRKELA, RODNEY 13901 US HWY ONE, SUITE ONE JUNO BEACH FL  DELETE  LA CITY-S1-2IP  LA CITY-S1-	SIGNATURE	Signature, type-d or printed name of registered agent and title if applicable. (NOTE: B	egistered Agent signature requ	ired when reinstaling) DATE						
SARKELA, RODNEY 19801 US HWY ONE, SUITE ONE UND BEACH FL  DELETE  22 NAME 22 NAME 22 NAME 22 NAME 23 STREET ADDRESS 24 CITY-S1-72P  DELETE  31 TILE NAME STREET ADDRESS 25 NAME 37 STREET ADDRESS 27 NAME 37 STREET ADDRESS 27 NAME 37 STREET ADDRESS 37 NAME 37 STREET ADDRESS 37 NAME 37 STREET ADDRESS 38	12.		13.							
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NAME	STREET ADDRESS		1.3 STREET ADDRESS	800 OCEAN NETAR RIE						
NAME	CITY-ST-ZIP	JUNO BEACH FL	1.4 CITY-ST-ZIP	JUNO BEACH FL 33408						
23 STREET ADDRESS   24 CITY-ST-ZIP   24 CITY-ST-ZIP   31 TITLE   Change   Addition   A	THLE	☐ DELETÉ	2.1 TITLE	☐ Change ☐ Addition						
City-Si-ZiP	NAME		2.2 NAME							
DELETE	STREET ADDRESS		2.3 STREET ADDRESS							
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THE DELETE 5.1 TITLE Change Addition  NAME  STREET ADDRESS  CHY-ST-ZIP  THE DELETE 6.1 TITLE  DELETE 6.1 TITLE  NAME  STREET ADDRESS  CHY-ST-ZIP  THE DELETE 6.2 NAME  STREET ADDRESS  CHY-ST-ZIP  1.1 Le Change Addition  Change Addition  Addition  6.2 NAME  STREET ADDRESS  CHY-ST-ZIP  1.4 Lido hereby certify that the information supplied with this filmo does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the	STREET ADDRESS		4.3 STREET ADDRESS							
NAME  STREET ADDRESS  CITY - ST - ZIP  TITLE  DELETE  61 TITLE  SA CITY - ST - ZIP  THE CAMBE  STREET ADDRESS  CITY - ST - ZIP  62 NAME  63 STREET ADDRESS  CITY - ST - ZIP  14. I do 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	CITY+S1-7IP	<u> </u>	4.4 CITY - ST - ZIP	· · · · · · · · · · · · · · · · · · ·						
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CITY-ST-ZIP  14. I do 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	STREET ADDRESS		6.3 STREET ADDRESS							
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	14. I do herel	by certify that the information supplied with this filing does not qualify t	or the exemption state	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the						

Lam an officer or director of appears in Block 12 or Block