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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

DIVISION OF CORPORATIONS

1999 DOCUMENT # P98000095522

1. Corporation Name NASSAU TIME INC.

Principal Place of Business

120 E PALMETTO PARK ROAD STE 450 BOCA RATON EL 33432

Mailing Address

120-E PALMETTO PARK ROAD STE 450 BOCA PATON FL 33432

Secretary of State

Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90034 035 ***150.00



The Language Da			DO NOT WRITE IN THIS SPACE		
20523 LINKSVIEW DR		3. Date Incorporated or Qualifed			
BOCA RATION, FL			11/12/1998		
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
20523 LINKSVIEW DR	26 20523 HNKSVI	iew DR	65-0883073	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
	27		5. Certificate of Status Desired	Fee Required	
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be	
BOCA KATON, FL	28 BOLA KATON, FL		Trust Fund Contribution	Added to Fees	
Zip Country	Zip Cou	<i>R</i> .	8. This corporation owes the current year	Intangible	
133434 25 P, BeACH_	29 3 3 4 3 4 30 1.	BEACH	Personal Property Tax.	☐ Yes XNo	
9. Name and Address of Current	10. Name and Address of New Registered Agent				
		81 Name		/ .	
EMP CORPORATE SERVICES, INC. 100 NE 3 AVE STE 1100		82 Street Address (P.O. Box Number is Not Acceptable)			
•					
		84 City		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.

12.	OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12							
TITLE	D	☐ DELETE	1.1 TITLE	☐ Change	☐ Addition					
NAME	BIEHL, JAMES F		1.2 NAME							
STREET ADDRESS	20523 LINKSVIEW DR		1.3 STREET ADDRESS		1					
CITY-ST-ZIP	BOCA RATON FL 33434		1.4 CITY-ST-ZIP							
TITLE	D	☐ DELETE	2.1 TITLE	☐ Change	☐ Addition					
NAME	BIEHL, DONNA F		2.2 NAME							
STREET ADDRESS	20523 LINKSVIEW DR		2.3 STREET ADDRESS	·						
	BOCA DATON EL 22424		0.40004.07.70		1					

Change -DELETE: 3.1 TITLE TITLE ---3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRÉS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE ☐ Change ☐ Addition 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition □ DELETE ☐ Change 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS

STREET ADDRESS 5.4 CITY-ST-ZIP CITY+ST-ZIP 6.1 TITLE □ DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

6.4 CITY-ST-ZIP CITY-ST-7IP

Change

Addition

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 arinual 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 receiver 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 chapter 607 on an attachment with an address, with all other like empowered.

SIGNATURE: