2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000034473

Entity Name: NATIONAL TRAVELER SERVICES INC

FILED Jan 10, 2017 **Secretary of State** CC9536957372

Current Principal Place of Business:

1095 BROKEN SOUND PARKWAY NORTH WEST **SUITE #300**

BOCA RATON, FL 33487-3501

Current Mailing Address:

1095 BROKEN SOUND PARKWAY NORTH WEST **SUITE #300** BOCA RATON, FL 33487-3501 US

FEI Number: 46-5428625 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BOCA RATON FL 33487-3501

HOSHOR, SANDRA 1035 SOUTH STATE ROAD #7 **SUITE #313** WELLINGTON, FL 33414 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:

City-State-Zip:

Electronic Signature of Registered Agent

City-State-Zip:

Officer/Director Detail:

Title **PRESIDENT** Title

Name ROSEN, BRANDON M. Name LANSMAN, DANIEL L.

1095 BROKEN SOUND PARKWAY 1095 BROKEN SOUND PARKWAY Address Address

NORTH WEST NORTH WEST SUITE #300 SUITE #300

TREASURER Title Title **SECRETARY**

ROSEN, BRANDON M. LANSMAN, DANIEL L. Name Name

Address 1095 BROKEN SOUND PARKWAY Address 1095 BROKEN SOUND PARKWAY

> NORTH WEST NORTH WEST **SUITE #300 SUITE #300**

City-State-Zip: BOCA RATON FL 33487-3501 City-State-Zip: BOCA RATON FL 33487-3501

Electronic Signature of Signing Officer/Director Detail

Date

BOCA RATON FL 33487-3501

PRESIDENT

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.