

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 815809

**FILED**  
**Mar 11, 2016**  
**Secretary of State**  
**CC4924543596**

**Entity Name:** NID CORPORATION

**Current Principal Place of Business:**

15436 N FLORIDA AVENUE  
SUITE 200  
TAMPA, FL 33613

**Current Mailing Address:**

15436 N FLORIDA AVENUE  
SUITE 200  
TAMPA, FL 33613

**FEI Number:** 34-0652556

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

THE PRENTICE-HALL CORPORATION SYSTEM INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE, FL 32301 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title S  
Name PALERMO, JAMES D  
Address 15436 N FLORIDA AVENUE STE 200  
City-State-Zip: TAMPA FL 33613

Title P/D  
Name DEBARTOLO, CYNTHIA R  
Address 15436 N FLORIDA AVENUE STE 200  
City-State-Zip: TAMPA FL 33613

Title CFO  
Name MALLITZ, DAVID S  
Address 15436 N FLORIDA AVENUE STE 200  
City-State-Zip: TAMPA FL 33613

Title V/D  
Name DEBARTOLO, LISA M  
Address 15436 N FLORIDA AVENUE STE 200  
City-State-Zip: TAMPA FL 33613

Title V  
Name HENNI, GEZA  
Address 15436 N FLORIDA AVE STE 200  
City-State-Zip: TAMPA FL 33613

*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.*

**SIGNATURE:** GEZA HENNI

**PRESIDENT**

**03/11/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date