

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P40314

Entity Name: ANDESA SERVICES, INC.**Current Principal Place of Business:**6575 SNOWDRIFT ROAD, STE 108
ALLENTOWN, PA 18106**Current Mailing Address:**6575 SNOWDRIFT ROAD, STE 108
ALLENTOWN, PA 18106 US**FEI Number:** 23-2545253**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NRAI SERVICES, INC
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	D
Name	BRIGGS, MALCOLM N
Address	1717 WILDBERRY ROAD
City-State-Zip:	BETHLEHEM PA

Title	PRESIDENT, CEO, DIRECTOR
Name	SCHEESE, RONALD
Address	4 RIDGEWAY CIR
City-State-Zip:	BIRDSBORO PA 19508

Title	D
Name	WALKER, JOHN E
Address	4317 SANCTUARY WAY
City-State-Zip:	BONITA SPRINGS FL 34134

Title	CFO, SECRETARY, TREASURER
Name	WILKIN, MARK
Address	3435 WINCHESTER RD #401
City-State-Zip:	ALLENTOWN PA 18104

Title	DIRECTOR
Name	GEORGE, PENDLETON III
Address	151 HONEY LOCUST
City-State-Zip:	RICHMOND VA 23238

Title	DIRECTOR
Name	COLLIER, PHILLIP V
Address	6575 SNOWDRIFT ROAD, STE 108
City-State-Zip:	ALLENTOWN PA 18106

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: MARK WILKIN**CFO, SECRETARY,
TREASURER****01/06/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date