

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000146600

Entity Name: NANA SINA, INC.

Current Principal Place of Business:

5033 W. LAUREL ST.
SUITE 100
TAMPA, FL 33607

Current Mailing Address:

P O BOX 1248
ODESSA, FL 33556 US

FEI Number: 02-0791917

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LIGORI, NICK
2111 N 15TH ST.
TAMPA, FL 33605 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 VPST
Name LIGORI, JOE
Address P O BOX 1248
City-State-Zip: ODESSA FL 33556

Title PRES
Name LIGORI, NICK J
Address P O BOX 1248
City-State-Zip: ODESSA FL 33556

Title VP
Name LIGORI, NICHOLAS R.
Address P O BOX 1248
City-State-Zip: ODESSA FL 33556

Title VP
Name LIGORI, JOHN H.
Address P O BOX 1248
City-State-Zip: ODESSA FL 33556

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: NICK J LIGORI

PRESIDENT

04/22/2015

Electronic Signature of Signing Officer/Director Detail

Date