2003 FOR PROFIT CORPORATION

Jan 21, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR)** F93000000210 DOCUMENT # 1. Entity Name 01-21-2003 90153 024 ***150.00 CORIN USA LIMITED, INC. Principal Place of Business Mailing Address THE CORINIUM CENTRE 10500 UNIVERSITY CTR. DRIVE CIRENCHESTER, GLOUCESTERSHIRE GL7 1YJ **SUITE 190 ENGLAND** TAMPA FL 33612 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State Applied For 4. FEI Number 59-3340933 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent: -7.:Name and Address of New Registered Agent GRAINGER, ALAN Street Address (P.O. Box Number is Not Acceptable) 10500 UNIVERSITY: CENTER, DRIVE SUITE 190 **TAMPA FL 33612** City Zip Code 8: 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. I am familiar with, and accept athe obligations of registered agent. -1.90 於對於於透露的對於發展的對於自然的對於自然的 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 14 mg (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE CD □ Delete TITLE Change ☐ Addition GIBSON, PETER NAME STREET ADDRESS WILLESLEY HOUSE, WILLESLEY NR MALMESBURY STREET ADDRESS CITY-ST-ZIP WILTSSHIRE, UNITED KINGDOM CITY-ST-ZIP TITLE MD ☐ Delete TITLE ☐ Change Addition NAME CONTROL PALING, IAN STREET. ADDRESS: CYCLAMEN LODGE-PRIVATE RD, RODBOROUGH COMM STREET ADDRESS CITY: ST. ZIP STROUD, GLOUCESTERSHIRE UK. CITY-ST-ZIP TITLE ☐ Delete TITLE To. 19 Change Addition HARTLEY, SIMON NAME NAME STREET ADDRESS WELLSWOOD HOUSE, 8 BATTLEDOWN-CHELTENHAM STREET ADDRESS CITY-ST-ZIP GLOUCEST<u>ershire, uk</u> CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition GRAINER, ALAN NAME STREET ADDRESS 8 PRIORY TERRACE, CHELTENHAM STREET ADDRESS CITY-ST-ZIP **GLOUCESTERSHIRE UK** CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WELLEY POILS Walkster wills walk to the Delete TITLE ☐ Change Addition NAME NAME VALTSCHAF, UMFORMER OF STREET ADDRESS

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address; with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIF

SIGNATURE AND THE PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

CR2E034 (10/02)