2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P14786 1. Entity Name NATIONAL SEA PRODUCTS INCORPORATED V						Jul 31, 2001 8:00 am Secretary of State 07-31-2001 90243 011 ***585.00				
Principal Plac 1 HIGHLINER P.O. BOX 839 PORTSMOUTH	AVENUE	Mailing Address 1 HIGHLINER AVENUE P.O. BOX 839 PORTSMOUTH NH 03801			,	- 10060240 				
2. Principal Place of Business		3. Mailing Address			Secretary of State 07-31-2001 90243 011 ****585.00 Secretary of State 07-31-2001 90243 011 ****585.00 SHANER AVENUE BOX 83 SMOUTH NH 03801 SING Acquiress DO NOT WRITE IN THIS SPACE A. FEI Number O1-0246085: Applied For Not Applicable Country S. Certificate of Status Desired \$8.75 Additional Fee Required Agent 7. Name and Address of New Registered Agent Namo Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code City FL Zip Code City FL Zip Code City FL Zip Code Dose of changing its registered dollice or registered agent, or both, in the State of Florida. (NOTE Registered Agent agents required when remainding) City FL Zip Code The September 12, 2001 Fee will be \$750.00 Inter September 12,	- T CERTIFER HET HRES DIRIN HOOGH ENGIN BEST DIRIN DIRIN BYRKE BIRIN DIRIN BYRKE (\$70)				
Suite, Apt. #, etc.		Suite, Apt. #, etc.								
City & State		City & State		4. F	El Number 01-02460	35:				
Zip Country		Zip	Country		5. (Dertificate of Status Desire	d 🗌			
	- 6Name and Address of Current R	egistered Agent		Name	7. 1	lame and Address of Nev	v Registered /	Agent		
C-T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD										
PĻANTATI	ON FL 33324			City				Zin Cod	e	
SIGNATURE . 9. This corporate filing in	Signature, typed or printed name of registered agent an pration is eligible to satisfy its Intangible requirement and elects to do so.	od title if applicable. (NOTE FILE NOW! After September 12	E: Registere	d Agent signature requir IS \$550.00 Fee will be \$750	red when re	ninstating) 10. Election Campaign	DATE			
(See criter	ia on back) OFFICERS AND D			epartment of St						
TITLE NAME	P SEBAN, RICHARD ONE HIGHLINER AVE. PORTSMOUTH NH 03801		TITLI NAM STRE	EET AODRESS	AL	BHIONS/GHANGES TO	THE TOLLTO AINE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DIETZ, D. F. 43 PORTER RD. ANDOVER MA	☐ Delete	NAM STRE	EET ADDRESS			j	☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MCGINN, JANE K. ONE HIGLINE AVE. PORTSMOUTH NH	☐ Delete	NAM STRE	EET ADDRESS	<u></u>			☐ 'Chánge	☐ Addition 1	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS MILTON, CLAIRE 100 BATTERY POINT LUNENBURG, NOVA SCOTIA, CA		NAM STRE	EET ADDRESS				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEMONE, HENRY E 100 BATTERY POINT LUNENBURG, NOVA SCOTIA, CA		nam Stri	EET ADDRESS				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NELSON, KELVIN L 100 BATTERY POINT LUNENBURG, NOVA SCOTIA, CA		NAM STRE	EET ADDRESS				☐ Change	☐ Addition	
indicated of the cor	on this report or supplemental report is poration or the receiver or trustee empor or on an attachment with an address, w	true and accurate and that n wered to execute this report ith all other IKO empowered	ny signa as requi	ture shall have the ired by Chapter 6	e same	legal effect as if made und	ler oath; that I a ame appears i	am an officer n Block 11 or	or director r Block 12 if	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #