

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000079394

Entity Name: CBN SECURE TECHNOLOGIES INC.**Current Principal Place of Business:**145 RICHMOND ROAD
OTTAWA, ON K1Z 1A1**Current Mailing Address:**C/O CANADIAN BANK NOTE COMPANY, LIMITED
145 RICHMOND ROAD, OTTAWA, ONTARIO
K1Z 1A1, CA**FEI Number:** 14-1840307**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS ROAD
#221E
PALM BEACH GARDENS, FL 33410 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 TREASURER, DIRECTOR
Name BASCOMBE, CRAIG
Address 18 AURIGA DRIVE
City-State-Zip: OTTAWA, ONTARIO K2E 7T9

Title PRESIDENT
Name SHAW, IAN
Address 18 AURIGA DRIVE
City-State-Zip: OTTAWA, ONTARIO K2E 7T9

Title DIRECTOR, SECRETARY
Name MCKECHNIE, GORDON
Address 145 RICHMOND ROAD
City-State-Zip: OTTAWA, ONTARIO K1Z 1A1

Title VP
Name BRIGHT, CORNEL
Address 18 AURIGA DRIVE
City-State-Zip: OTTAWA, ONTARIO K2E 7T9

Title BUSINESS DEVELOPMENT
Name SANCHEZ, DAN
Address 18 AURIGA DRIVE
City-State-Zip: OTTAWA, ONTARIO K2E 7T9

Title SENIOR VP MANUFACTURING
Name ROBINSON, MARILLOU
Address 145 RICHMOND ROAD
City-State-Zip: OTTAWA, ONTARIO K1Z 1A1

Title BUSINESS DEVELOPMENT
Name FAGAN, JIM
Address 18 AURIGA DRIVE
City-State-Zip: OTTAWA, ONTARIO K2E 7T9

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: CRAIG BASCOMBE

TREASURER, DIRECTOR 03/12/2015

Electronic Signature of Signing Officer/Director Detail_____
Date