

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000002808

Entity Name: CELLULAR SPECIALTIES, INC.

Current Principal Place of Business:

670 NORTH COMMERCIAL ST
SUITE 202
MANCHESTER, NH 03101

Current Mailing Address:

670 NORTH COMMERCIAL ST
SUITE 202
MANCHESTER, NH 03101

FEI Number: 04-3358604

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 CEO
Name WILSON, R. BRUCE
Address 56 SETON DR
City-State-Zip: BEDFORD NH 03101

Title TRES
Name GOODRICH, SCOTT T
Address 815 DODGE HILL RD
City-State-Zip: FRANCESTOWN NH 03043

Title SECR
Name CARR, KELLEY R
Address 2 MOORE LANE
City-State-Zip: EXETER NH 03833

Title T
Name GOODRICH, FRED N. S.
Address 255 JOHN TASKER ROAD
City-State-Zip: BARNSTEAD NH 03043

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: R. BRUCE WILSON

PRESIDENT

03/27/2013

Electronic Signature of Signing Officer/Director Detail

Date