

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000005623

Entity Name: AXCHEM USA, INC.

**Current Principal Place of Business:**

6 OAK BRANCH DR.  
STE C  
GREENSBORO, NC 27407

**Current Mailing Address:**

6 OAK BRANCH DR.  
STE C  
GREENSBORO, NC 27407 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 DIRECTOR  
Name MARULLO, WILLIAM  
Address 6 OAK BRANCH DR.  
STE C  
City-State-Zip: GREENSBORO NC 27407

Title CHAIRMAN OF THE BOARD  
Name MARULLO, WILLIAM  
Address 6 OAK BRANCH DR.  
STE C  
City-State-Zip: GREENSBORO NC 27407

Title TREASURER / CFO  
Name MARULLO, WILLIAM  
Address 6 OAK BRANCH DR.  
STE C  
City-State-Zip: GREENSBORO NC 27407

Title SECRETARY  
Name MARULLO, WILLIAM  
Address 6 OAK BRANCH DR.  
STE C  
City-State-Zip: GREENSBORO NC 27407

Title PRESIDENT / CEO  
Name MARULLO, WILLIAM  
Address 6 OAK BRANCH DR.  
STE C  
City-State-Zip: GREENSBORO NC 27407

*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: WILLIAM MARULLO

SECRETARY

04/15/2017

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date