

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F22000007177

**Entity Name:** NORSE ATLANTIC UK LTD, INC**Current Principal Place of Business:**5525 NW 15TH AVENUE, SUITE 202  
FORT LAUDERDALE, FL 33309**Current Mailing Address:**5525 NW 15TH AVENUE, SUITE 202  
FORT LAUDERDALE, FL 33309 US**FEI Number:** 98-1701032**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ARAZOZA & FERNANDEZ-FRAGA P.A.  
2100 SALZEDO STREET, SUITE 300  
CORAL GABLES, FL 33134 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           | D                              |
| Name            | BORG, MARIA                    |
| Address         | 5525 NW 15TH AVENUE, SUITE 202 |
| City-State-Zip: | FORT LAUDERDALE FL 33309       |

|                 |                                |
|-----------------|--------------------------------|
| Title           | D                              |
| Name            | BOILING, BEN                   |
| Address         | 5525 NW 15TH AVENUE, SUITE 202 |
| City-State-Zip: | FORT LAUDERDALE FL 33309       |

|                 |                                |
|-----------------|--------------------------------|
| Title           | D                              |
| Name            | JAKOBSEN, BEATE                |
| Address         | 5525 NW 15TH AVENUE, SUITE 202 |
| City-State-Zip: | FORT LAUDERDALE FL 33309       |

|                 |                                |
|-----------------|--------------------------------|
| Title           | D                              |
| Name            | THOMAS, DAVID WILLIAM          |
| Address         | 5525 NW 15TH AVENUE, SUITE 202 |
| City-State-Zip: | FORT LAUDERDALE FL 33309       |

|                 |                                |
|-----------------|--------------------------------|
| Title           | D                              |
| Name            | LARSEN, BJORN TORE             |
| Address         | 5525 NW 15TH AVENUE, SUITE 202 |
| City-State-Zip: | FORT LAUDERDALE FL 33309       |

*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:** BEATE JAKOBSEN

D

02/08/2023

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