2021 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P25489

Entity Name: BLUETRITON BRANDS, INC.

Current Principal Place of Business:

900 LONG RIDGE ROAD **BUILDING #2**

STAMFORD, CT 06902

FILED May 27, 2021 **Secretary of State** 1277216980CC

Current Mailing Address:

900 LONG RIDGE ROAD **BUILDING #2** STAMFORD, CT 06902 US

FEI Number: 94-3027237 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 S. 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:

City-State-Zip:

Address

Title

Name

Address

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title ASSISTANT TREASURER Title DICINTO, SUZANNE Name Name Address 900 LONG RIDGE ROAD Address **BUILDING #2**

BUILDING #2

ROTHMAN, MAEVE

ASSISTANT SECRETARY

900 LONG RIDGE ROAD

ASSISTANT SECRETARY PIEPMEIER, EDWARD BION

STAMFORD CT 06902

STAMFORD CT 06902 City-State-Zip:

Title ASSISTANT SECRETARY CULLARO, GIANCARLO Name Address

900 LONG RIDGE ROAD Address

900 LONG RIDGE ROAD **BUILDING #2**

BUILDING #2

STAMFORD CT 06902 City-State-Zip:

STAMFORD CT 06902 City-State-Zip:

Title ASSISTANT SECRETARY Title ASSISTANT TREASURER, CFO, EVP

LEUNG, JACLYN K. Name

BEDI, VIVEK 900 LONG RIDGE ROAD Address

900 LONG RIDGE ROAD **BUILDING #2**

BUILDING #2

STAMFORD CT 06902 City-State-Zip:

STAMFORD CT 06902 City-State-Zip:

BUILDING #2

Title SECRETARY, TREASURER,

Title

Name

Name

DIRECTOR

PRESIDENT, DIRECTOR, INTERIM CHIEF EXECUTIVE OFFICER

900 LONG RIDGE ROAD

LEE, TONY W.

METROPOULOS, C. DEAN Name

> 900 LONG RIDGE ROAD Address

BUILDING #2

STAMFORD CT 06902 STAMFORD CT 06902 City-State-Zip: City-State-Zip:

Continues on page 2

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: PIEPMEIER, EDWARD BION

ASSISTANT SECRETARY

05/27/2021 Date

Officer/Director Detail Continued:

VP, DIRECTOR Title

Name SPIELVOGEL, R. SCOTT 900 LONG RIDGE ROAD BUILDING #2 Address

City-State-Zip: STAMFORD CT 06902