

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 844656

Entity Name: MAERSK INC.

FILED
Apr 10, 2012
Secretary of State

Current Principal Place of Business:

2 GIRALDA FARMS
MADISON AVENUE
MADISON, NJ 079400880 US

New Principal Place of Business:

2 GIRALDA FARMS
MADISON AVENUE
MADISON, NJ 07940 US

Current Mailing Address:

PO BOX 874
TAX DEPARTMENT
MADISON, NJ 07940 US

New Mailing Address:

FEI Number: 13-5159146 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P
Name: BRUNER, J RUSSELL
Address: 2 GIRALDA FARMS, MADISON AVENUE
City-St-Zip: MADISON, NJ 07940 US

Title: VP
Name: TIERNEY, MARK
Address: 2 GIRALDA FARMS, MADISON AVENUE
City-St-Zip: MADISON, NJ 07940 US

Title: S
Name: COLANGELO, MICHAEL
Address: 2 GIRALDA FARMS, MADISON AVENUE
City-St-Zip: MADISON, NJ 07940 US

Title: D
Name: COHEN, JOEL
Address: 110 E. 2ND AVE
City-St-Zip: NEW YORK, NY 10028

Title: T
Name: ARNESEN, PATRICIA
Address: 2 GIRALDA FARMS, MADISON AVENUE
City-St-Zip: MADISON, NJ 07940

Title: VP
Name: COLANGELO, MICHAEL
Address: 2 GIRALDA FARMS, MADISON AVENUE
City-St-Zip: MADISON, NJ 07940 US

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: MICHAEL COLANGELO

S

04/10/2012

Electronic Signature of Signing Officer or Director

Date