FILED

## 2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## Mar 03, 2002 8:00 am Secretary of State F97000003175 DOCUMENT # 1. Entity Name 03-03-2002 90133 047 \*\*\*150.00 PURE TECHNOLOGIES U.S. INC. Principal Place of Business Mailing Address 1050 (340-12 AVE. S.W. 1050. 340-12 AVE. S.W. CALGARY ALBERTA T2P 4K7 CA CALGARY ALBERTA T2P 4K7 CA CA. 2. Principal Place of Business 3. Mailing Address 3rd Floor, 705-11th Ave. 3rd Floor, 705-11th Suite, Apt. #, etc Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 86-0853190 Calgar alaary Not Applicable Zio Zip \$8.75 Additional 5. Certificate of Status Desired cANAbA TUR OF ANADA TIR DES Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD **PLANTATION FL 33324** City Zip Code FL 8. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. **Change** Addition TITLE ☐ Delete TITLE ELLIOTT, JOHN F NAME NAME 3rd Floor, 705-11th Ave. 1050, 340 12TH AVE. SW STREET ADDRESS STREET ADDRESS CALGARY, ALBERTA T2R 1L5 CITY-ST-ZIP CITY-ST-7IP Calgary, Alberta ☐ Addition TITLE ☐ Delete TITLE Change NAME NAME PAULSON, JAMES E 3rd Floor, 705-11th Ave. STREET ADDRESS STREET ADDRESS 1050, 340 12TH AVE, SW CiTY-ST-7IP CITY-ST-ZIP CALGARY, ALBERTA T2R 1L5 Change etary t tz. Jenkins TITLE **D**elete TITLE X Addition NAME STUBBS, JENNIFER NAME 3rd Floor, 705-14h Ave. STREET ADDRESS STREET ADDRESS 1050 340 12TH AVE SW CITY-ST-7IP CITY-ST-ZIP CALGARY, ALBERTA T2R 1L5 TITLE ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if

BAND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR