

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000003125

1. Entity Name

NAUPLIUS LIMITED COMPANY

FILED

Apr 25, 2000 8:00 am
Secretary of State

04-25-2000 90061 037 ***150.00

Principal Place of Business

Mailing Address

22 GRENVILLE ST
ST. HELIER, JERSEY JE48PX
CHANNEL ISLANDS

PO BOX 87
JERSEY JE48PX
CHANNEL ISLANDS

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
DELRAY BEACH, FL

Zip

Country

Zip

Country

33444



DO NOT WRITE IN THIS SPACE

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROMANO, RODNEY G ESQ
14 SOUTH SWINTON AVENUE
DELRAY BEACH FL 33444

Name

SMITHER, ROBERT M. JR

Street Address (P.O. Box Number is Not Acceptable)

14 S. SWINTON AVE

City

DELRAY BEACH

FL

Zip Code

33444

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.

ROBERT M. SMITHER, JR - D/A

(NOTE: Registered Agent signature required when reinstating)

4/21/00

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE C
NAME CRILL, JAMES D.P.
STREET ADDRESS 22 GRENVILLE ST, ST HELIER JERSEY JE48PX
CITY-ST-ZIP CHANNEL ISLANDS

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE VC
NAME DAVIES, NICOLA C
STREET ADDRESS 22 GRENVILLE ST, ST HELIER JERSEY JE48PX
CITY-ST-ZIP CHANNEL ISLANDS

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D
NAME SNOWDEN, PETER R
STREET ADDRESS 22 GRENVILLE ST, ST HELIER JERSEY JE48PX
CITY-ST-ZIP CHANNEL ISLANDS

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

RESIGNED 26 APRIL 1999 ☒ Change ☐ Addition

TITLE D
NAME FARLEY, KEVIN P
STREET ADDRESS 22 GRENVILLE ST, ST HELIER JERSEY JE48PX
CITY-ST-ZIP CHANNEL ISLANDS

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE S
NAME MOURANT & CO. SECRETARIES LIMITED
STREET ADDRESS 22 GRENVILLE ST, ST HELIER JERSEY JE48PX
CITY-ST-ZIP CHANNEL ISLANDS

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE D
NAME SMITHER, ROBERT M. JR
STREET ADDRESS 14 S. SWINTON AVE
CITY-ST-ZIP DELRAY BEACH, FL 33444

☐ Change ☒ Addition

13. I hereby 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

AUTHORIZED SIGNATORY

MOURANT & CO. SECRETARIES LTD.

Date

Daytime Phone #

11 JANUARY 2000 44-1534-609000

CR2E034 (9/99)