

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000030071

1. Entity Name

NORGIPS USA, INC.

FILED

Mar 21, 2000 8:00 am
Secretary of State

03-21-2000 90098 047 ***150.00

Principal Place of Business

Mailing Address

9018 DEERPARK LANE
CHARLOTTE NC 28277
US

9018 DEERPARK LANE
CHARLOTTE NC 28277-9012
US

2. Principal Place of Business

250 S. Australian Ave.

3. Mailing Address

250 S. Australian Ave.

Suite, Apt. #, etc.

Suite 701

Suite, Apt. #, etc.

Suite 701

City & State

West Palm Beach FL

City & State

West Palm Beach FL

Zip

33401

Country

US

Zip

33401

Country

US

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name John F. Kingston, President

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

Norgips USA, Inc.

250 S. Australian Ave. Suite 701

City West Palm Beach

FL

Zip Code 33401

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

John F. Kingston

John F. Kingston, President

3/13/00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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

TITLE PD
NAME NILSEN, THOR
STREET ADDRESS ANCHERSSENS VEI 83 N-3043
CITY-ST-ZIP DRAMMEN NO ☐ Delete

TITLE VPD
NAME HENNING, FUHRE
STREET ADDRESS JUTULVEIEN 23 D
CITY-ST-ZIP 3042 DRAMMEN NO ☐ Delete

TITLE ST
NAME JORGEN HOY, HANS
STREET ADDRESS SVALEVELEN 17
CITY-ST-ZIP 3030 DRAMMEN NO ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CEO ☒ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME Fuhre, Henning ☒ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE President
NAME John F. Kingston ☐ Change ☒ Addition
STREET ADDRESS 13145 Doubletree Circle
CITY-ST-ZIP Wellington, FL 33414

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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:

John F. Kingston

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/13/00

Date

561-651-7417

Daytime Phone #