

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005415

Entity Name: BELKIN, INC.**Current Principal Place of Business:**12045 EAST WATERFRONT DR.
PLAYA VISTA, CA 90094**Current Mailing Address:**12045 EAST WATERFRONT DR.
PLAYA VISTA, CA 90094 US**FEI Number:** 27-0063862**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NRAI SERVICES, INC
1200 SOUTH 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title PRESIDENT/CEO
Name LU, CHRISTOPHER
Address 12045 EAST WATERFRONT DR.
City-State-Zip: PLAYA VISTA CA 90094

Title CFO
Name SINGH, JASJIT JAY
Address 12045 EAST WATERFRONT DR.
City-State-Zip: PLAYA VISTA CA 90094

Title SECRETARY
Name TRIGGS, DEAN THOMAS
Address 12045 EAST WATERFRONT DR.
City-State-Zip: PLAYA VISTA CA 90094

Title CHAIRMAN OF THE BOARD
Name LU, CHRISTOPHER
Address 12045 EAST WATERFRONT DR.
City-State-Zip: PLAYA VISTA CA 90094

Title DIRECTOR
Name LU, CHRISTOPHER
Address 12045 EAST WATERFRONT DR.
City-State-Zip: PLAYA VISTA CA 90094

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: TRIGGS, DEAN THOMAS**SECRETARY****04/28/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date