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|--|---------------------|--|------------------|---|---------|-----------------------|--|
| No. C 97487 | | Due no later than Jan 31, 2014 | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | 1. Mailing Address: Correct in this box if needed. LAIRD PLASTICS, INC. ANABEL EGOZCUE TAX ACCOUNTANT 6800 BROKEN SOUND PARKWAY STE 150 BOCA RATON FL 33487 USA | | NATIONAL REGISTERED AGENTS INC 921 S ORCHARD ST STE G BOISE ID 83705 USA | | | |
| | | | | 3. <u>New</u> Registered Agent Signature: * | | | |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional). | | | | | | | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code | |
| PRESIDENT | MARK W KRAMER | 6800 BROKEN SOUND PARKWAY STE 150 | BOCA RATON | FL | USA | 33487 | |
| TREASURER | WILFREDO A FIGUERAS | 6800 BROKEN SOUND PARKWAY-150 | BOCA RATON | FL | USA | 33487 | |
| SECRETARY | DAVID T BRADFORD | 31356 VIA COLINAS SUITE 106 | WESTLAKE VILLAGE | CA | USA | 91362 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| DE C 97487 | | Signature: Anabel Egozcue | | | | Date: 11/20/2013 | |
| | | Name (type or print): Anabel Egozcue | | | | Title: Tax Accountant | |
| Processed 11/20/2013 | | * Electronically provided signatures are accepted as original signatures. | | | | | |