

|  |                   |  |            |  |         |             |  |
|--|-------------------|--|------------|--|---------|-------------|--|
| No. <b>C 211134</b>  |                   | <b>Due no later than Sep 30, 2017</b>  |            | <b>2. Registered Agent and Address (NO PO BOX)</b>                         |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                   | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br>HUB PARKING TECHNOLOGY USA INC.<br>761 COMMONWEALTH DRIVE<br>SUITE 204<br>WARRENDALE PA 15086<br>USA |            | NATIONAL REGISTERED AGENTS INC<br>921 S ORCHARD ST STE G<br>BOISE ID 83705 |         |             |  |
|  |                   |  |            | 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 |  |
| DIRECTOR   | JOHN LOVELL       | 761 COMMONWEALTH DRIVE SUITE 204   | WARRENDALE | PA   | USA     | 15086       |  |
| DIRECTOR   | EZECHIELE GALLONI | 761 COMMONWEALTH DRIVE SUITE 204   | WARRENDALE | PA   | USA     | 15086       |  |
| DIRECTOR   | ENRICO NARDI      | 761 COMMONWEALTH DRIVE SUITE 204   | WARRENDALE | PA   | USA     | 15086       |  |
| SECRETARY  | MICHELLE ANDERSON | 761 COMMONWEALTH DRIVE SUITE 204   | WARRENDALE | PA   | USA     | 15086       |  |
| PRESIDENT  | JOHN LOVELL       | 761 COMMONWEALTH DRIVE SUITE 204   | WARRENDALE | PA   | USA     | 15086       |  |
| 5. Organized Under the Laws of:<br><br><b>DE<br/>C 211134</b>  |                   | 6. Annual Report must be signed.*<br>Signature: Michelle Anderson<br>Name (type or print): Michelle Anderson<br><br>Date: 09/21/2017<br>Title: Secretary   |            |  |         |             |  |
| Processed 09/21/2017   |                   | * Electronically provided signatures are accepted as original signatures.  |            |  |         |             |  |