



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
 Office of the Secretary of State - Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040 - Email: corporations@sos.ri.gov - Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2014

Filing Period: January 1 - March 1 - This report must be typed or printed legibly.

Filing Fee: \$50.00 - FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 798400		2. Exact name of the Corporation Oyster Marine Limited			
3. Principal office address Fox's Marina The Strand			City Wherstead, Ipswich	State IP2 8SA	Zip UK
4. Business Phone No. 401-841-8480			5. State of Incorporation United Kingdom		
6. Brief description of the character of business conducted in Rhode Island Sale of boats of all kinds and descriptions					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name			Vice-President Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Secretary Name Steven John Hobbs			Treasurer Name		
Street Address Fox's Marina The Strand			Street Address		
City Wherstead, Ipswich	State IP2 8SA	Zip UK	City	State	Zip
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Harvey Richard Austin Jones			Director Name Steven John Hobbs		
Street Address Fox's Marina The Strand			Street Address Fox's Marina The Strand		
City Wherstead, Ipswich	State IP2 8SA	Zip UK	City Wherstead, Ipswich	State IP2 8SA	Zip UK
Director Name David Rolfe Tydeman			Director Name		
Street Address Fox's Marina The Strand			Street Address		
City Wherstead, Ipswich	State IP2 8SA	Zip UK	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			0	Common	\$.01 Par

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

File Date _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

 20 Jan 2014
 Signature of Authorized Representative Date

Steven John Hobbs
 Print or Type Name of Authorized Representative

Form No. 630
 Revised 01/2012

FILED

MAR 21 2014

BY 11588