| RI SOS Filing Nu | ımber: 2024/ | 19579590 Г | Date: 3/2 ⁻ | | AM | | |
|--|--------------------------------|---|------------------------|-------------------------------|---------------------|-----------------------|--|
| State of Rhode Isla | | | | FILED | 22AE | | |
| Department of S | | iess Service: | e Nivisio | m 5 % 555. | مصتعله | | |
| Annual Report for the year: | 2023 | |) ((1,0,0,0) | MAR 27 2024 | 272 | | |
| Corporation | | | BY | . QV NR P | ٦ ₂ 8 | | |
| Filing period: February 1 | - May 1 | | - | | 7 (0 to | | |
| Penalty: Additional \$25.00 | A fee if form is no | at Elad by May 24 | _ | 9:361 | PW S | | |
| i. ⊏nuty io number | 2. Exact nam | e of the Corporation | on . | 1.0=- | 29 | | |
| 001709057 | KPI Oce | eanConnect, | Inc | | | | |
| 3. Principal Office Address | | | City | | Iciata | | |
| 116 Chestnut Street, Suit | ite 300 | | | Bank | State NJ | Zip 07701 | |
| 4. NAICS Code | | intion of the chara | I | ness conducted in Rh | | 07701 | |
| 454310 | Reseller c | of Marine Fuel | l and or [| 1655 COHQUEGG III AH | iode Island | | |
| 5. State of Incorporation | - | Reseller of Marine Fuel and or Lubricants | | | | | |
| DE | | | | | | | |
| 7. List ALL officers (names and ad | ddresses) | | | | | | |
| President Name Brian Coyne | 410000, | | Vice-Pre | Check testident Name | the box to indicat | e an attachment | |
| Street Address | | | | | | | |
| 116 Chestnut S | Street, Suite | 300 | Street Ac | ddress | | | |
| Red Bank | State NJ | ^{Zip} 07701 | City | | State | Zip | |
| Secretary Name Ian G. Sharpe | Secretor, Name | | | Treasurer Name Ion C. Chamber | | | |
| Street Address | | | | lan G. Sharpe | | | |
| 116 Chestnut S | 116 Chestnut Street, Suite 300 | | | dress 116 Chestr | nut Street, Su | | |
| ^{City} Red Bank | State NJ | ^{Zip} 07701 | City Re | ed Bank | State NJ | Zip 07701 | |
| 8. List ALL directors (names and ac Director Name | | | | Check t | | an attachment | |
| Anders Gronbor | _r rg | | Director N | Name | | Turi dittara in incin | |
| Street Address Turbinevej 10 | | | Street Address | | | | |
| ^{City} Middelfart, Denmark | State | Zip | City | | State | Zip | |
| Director Name | rector Name | | Director Name | | | | |
| Street Address | Street Address | | | | | | |
| | | | Street Address | | | | |
| City | State | Zip | City | | State | Zip | |
| 3. Shares Authorized | | 140 Obarra lan | | | | | |
| his information is currently of record | d in the | 10. Shares Issu NUMBER OF S | IED SHARES | Check th | he box to indicate | an attachment | |
| Department of State. | | 400 | | | | PAR VALUE | |
| hanges require an additional filing. | | | | Ordinary | \$1 | <u> </u> | |
| 1 This report must be executed or | - Labelt of the on | | | | 1 | | |
| 1. This report must be executed on eiver or trustee, this report must be inder penalty of perfury. I declare | e executed on be | poration by an authalf of the comore | ithorized rep | presentative. If the co | rporation is in the | hands of a re- | |
| Inder penalty of perjury, I declare | e and affirm that | t I hove everely a | of 45-1 | rt, including any acc | companying sch | endulae and | |
| tatements, and that all statement lame of Authorized Representative | <u>ts contained nei</u> | rein are true and | correct. | | | Yuuits allu | |
| an G. Sharpe | | | Date Mar 26, 2024 | | | | |
| ignature of Authorized Representat | tive | | - | | | | |
| | | | | | | | |

MAIL TO:

Division of Business Services

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Phone: (401) 222-3040
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