

UCC-1 Form

FILER INFORMATION

Full name: **CORPORATION SERVICE COMPANY**

Email Contact at Filer: **RISOSUCCFILINGSV3@CSCGLOBAL.COM**

SEND ACKNOWLEDGEMENT TO

Contact name: **CORPORATION SERVICE COMPANY**

Mailing Address: **801 ADLAI STEVENSON DRIVE**

City, State Zip Country: **SPRINGFIELD, IL 62703 USA**

DEBTOR INFORMATION

Org. Name: **TEKNOR APEX COMPANY**

Mailing Address: **505 CENTRAL AVENUE**

City, State Zip Country: **PAWTUCKET, RI 02861 USA**

SECURED PARTY INFORMATION

Org. Name: **ABSOLUTE HAITIAN CORPORATION**

Mailing Address: **94 GARDNER STREET**

City, State Zip Country: **WORCESTER, MA 01610 USA**

TRANSACTION TYPE: STANDARD

CUSTOMER REFERENCE: 2340 21889

COLLATERAL

HAITIAN INJECTION MOLDING MACHINERY, MODEL MA III 3200/1350, 360 U.S. TONS S/N 202107032067037 INVOICE 63169