

THE REPUBLIC OF SINGAPORE

Certificate No.: 411330-1738380-002



ABS

DOCUMENT OF COMPLIANCE

Issued under the provisions of the INTERNATIONAL CONVENTION
FOR THE SAFETY OF LIFE AT SEA, 1974, as amended
under the authority of the Government of
THE REPUBLIC OF SINGAPORE

by the AMERICAN BUREAU OF SHIPPING

Name and address of the Company:
(see paragraph 1.1.2 of the ISM Code)

NEPTUNE SHIPMANAGEMENT SERVICES PTE LTD.

456 Alexandra Road #07-00 NOL Building,

119962, Singapore

Company identification number: 1043710

THIS IS TO CERTIFY THAT the Safety Management System of the Company has been audited and that it complies with the requirements of the International Management Code for the Safe Operation of Ships and for Pollution Prevention (ISM Code) for the type(s) of ships listed below (delete as appropriate):

- ~~Passenger Ship~~
- ~~Passenger High Speed Craft~~
- ~~Cargo High Speed Craft~~
- ~~Bulk Carrier~~
- ~~Oil Tanker~~
- ~~Chemical Tanker~~
- ~~Gas Carrier~~
- ~~Mobile Offshore Drilling Unit~~
- Other Cargo Ship (Container Carrier)

This Document of Compliance is valid until 19 December 2014, subject to periodical verification.

Completion date of the audit on which this certificate is based: 24 November 2009

Issued at: Singapore
(place of issue of the document)

Date of Issue 24 November 2009

Kuan Yeh Ching, Pacific Exec. Admin.
(Signature of the duly authorized official issuing the certificate)



ENDORSEMENT FOR ANNUAL VERIFICATION

THIS IS TO CERTIFY THAT, at the periodical verification in accordance with regulation IX/6.1 of the Convention and paragraph 13.4 of the ISM Code, the Safety Management System was found to comply with the requirements of the ISM Code.

1st ANNUAL VERIFICATION

Signed: (Stanley Bhandari)
(Signature of authorized official)



Place: SINGAPORE

Date: 08 FEB 2011

2nd ANNUAL VERIFICATION

Signed: _____
(Signature of authorized official)

Place: _____

Date: _____

3rd ANNUAL VERIFICATION

Signed: _____
(Signature of authorized official)

Place: _____

Date: _____

4th ANNUAL VERIFICATION

Signed: _____
(Signature of authorized official)

Place: _____

Date: _____