

**2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M0300000166

Entity Name: UNIMAS TAMPA LLC

**Current Principal Place of Business:**

500 FRANK W BURR BLVD  
TEANECK, NJ 07666

**Current Mailing Address:**

500 FRANK W BURR BLVD  
TEANECK, NJ 07666 US

FEI Number: 65-0510875

Certificate of Status Desired: No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**FILED**  
**Apr 29, 2021**  
**Secretary of State**  
**4123208060CC**

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title CHIEF LEGAL AND CORPORATE AFFAIRS OFFICER  
Name SCHWARTZ, JONATHAN  
Address 500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

Title SR. VICE PRESIDENT  
Name IZVERSKY, VLAD  
Address 500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

Title CHIEF TAX OFFICER  
Name IZVERSKY, VLAD  
Address 500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

Title ASST. SECRETARY  
Name EVANS, DANIEL  
Address 500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

Title CHIEF ACCOUNTING OFFICER  
Name ENTWISTLE, BOB  
Address 500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

Title SR. VICE PRESIDENT  
Name ENTWISTLE, BOB  
Address 500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

Title CEO  
Name SADUSKY, VINCENT  
Address 500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

Title SECRETARY  
Name SCHWARTZ, JONATHAN  
Address 500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

**Continues on page 2**

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

SIGNATURE: JOHN PAUL ACEVES

ASST. SECRETARY

04/29/2021

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date

**Authorized Person(s) Detail Continued :**

Title CFO  
Name LORI, PETER H.  
Address 500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

Title EXEC. VICE PRESIDENT  
Name LAZO, MARGARET  
Address 500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

Title DIRECTOR  
Name LORI, PETER H.  
Address 500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

Title EXEC. VICE PRESIDENT  
Name LORI, PETER H.  
Address 500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

Title CHIEF HUMAN RESOURCES OFFICER  
Name LAZO, MARGARET  
Address 500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

Title DIRECTOR  
Name SCHWARTZ, JONATHAN  
Address 500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

Title ASST. SECRETARY  
Name ACEVES, JOHN PAUL  
Address 500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

Title EXEC. VICE PRESIDENT  
Name SCHWARTZ, JONATHAN  
Address 500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666