

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 838478

Entity Name: IMTRA CORPORATION**Current Principal Place of Business:**30 SAMUEL BARNET BLVD
NEW BEDFORD, MA 02745**Current Mailing Address:**30 SAMUEL BARNET BLVD
NEW BEDFORD, MA 02745**FEI Number:** 04-2137249**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DICKSON, EDWARD
3550 TITANIC CIRCLE
INDIALANTIC, FL 32903 US*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:** EDWARD DICKSON

03/29/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIRMAN
Name FARNHAM, WILLIAM
Address 30 SAMUEL BARNET BLVD
City-State-Zip: NEW BEDFORD MA 02745

Title PRESIDENT
Name BRAITMAYER, ERIC
Address 30 SAMUEL BARNET BLVD
City-State-Zip: NEW BEDFORD MA 02745

Title DIRECTOR
Name BRAITMAYER, JOHN
Address 30 SAMUEL BARNET BLVD
City-State-Zip: NEW BEDFORD MA 02745

Title VP
Name FARNHAM, CHARLES
Address 30 SAMUEL BARNET BLVD
City-State-Zip: NEW BEDFORD MA 02745

Title DIRECTOR
Name FARBER III, DAWSON
Address 30 SAMUEL BARNET BLVD
City-State-Zip: NEW BEDFORD MA 02745

Title DIRECTOR
Name MCDONOUGH, JOSEPH
Address 30 SAMUEL BARNET BLVD
City-State-Zip: NEW BEDFORD MA 02745

Title DIRECTOR
Name FELLOWS, JEFFREY
Address 30 SAMUEL BARNET BLVD
City-State-Zip: NEW BEDFORD MA 02745

Title CFO
Name VANCURA, JEFFREY
Address 30 SAMUEL BARNET BLVD
City-State-Zip: NEW BEDFORD MA 02745

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JEFFREY VANCURA

CFO

03/29/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name LARSEN, ALEXANDER
Address 30 SAMUEL BARNET BLVD
City-State-Zip: NEW BEDFORD MA 02745

Title VP
Name KILGORE, PETER
Address 30 SAMUEL BARNET BLVD
City-State-Zip: NEW BEDFORD MA 02745