

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000004784

Entity Name: TELE-WORKS, INC.**Current Principal Place of Business:**1080 SOUTH MAIN STREET
BLACKSBURG, VA 24060**Current Mailing Address:**P.O. BOX M
BLACKSBURG, VA 24063**FEI Number:** 54-1398116**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title CEO, DIRECTOR, PRESIDENT,
SECRETARY, TREASURER, CFO
Name SHARMA, DUSHYANT
Address 13024 BALLANTYNE CORPORATE
PLACE
SUITE 450
City-State-Zip: CHARLOTTE NC 28277

Title DIRECTOR
Name KLEIN, JASON
Address 1080 SOUTH MAIN STREET
City-State-Zip: BLACKSBURG VA 24060

Title AUTHORIZED PERSON
Name LEARY, KARA
Address 1080 SOUTH MAIN STREET
City-State-Zip: BLACKSBURG VA 24060

Title DIRECTOR
Name MALINOWSKI, ADAM
Address 13024 BALLANTYNE CORP PLACE
#450
City-State-Zip: CHARLOTTE NC 28277

Title DIRECTOR
Name PALUMBO, ROB
Address 1080 SOUTH MAIN STREET
City-State-Zip: BLACKSBURG VA 24060

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: KARA LEARY**AUTHORIZED PERSON****02/27/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date