

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000003913

Entity Name: TESCOAN USA INC.

Current Principal Place of Business:

765 COMMONWEALTH DRIVE, SUITE 101
WARRENDALE, PA 15086

Current Mailing Address:

765 COMMONWEALTH DRIVE, SUITE 101
WARRENDALE, PA 15086

FEI Number: 25-1576402

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COGENCY GLOBAL INC.
115 NORTH CALHOUN ST., SUITE 4
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 TREASURER
Name OWENS, ANTHONY D
Address 765 COMMONWEALTH DRIVE, SUITE
 101
City-State-Zip: WARRENDALE PA 15086

Title SECRETARY
Name OWENS, CYNTHIA D
Address 765 COMMONWEALTH DRIVE, SUITE
 101
City-State-Zip: WARRENDALE PA 15086

Title C
Name KLIMA, JAROSLAV
Address 765 COMMONWEALTH DRIVE, SUITE
 101
City-State-Zip: WARRENDALE PA 15086

Title VC
Name MLADEK, MICHAEL
Address 765 COMMONWEALTH DRIVE, SUITE
 101
City-State-Zip: WARRENDALE PA 15086

Title DIRECTOR
Name OWENS, ANTHONY D
Address 765 COMMONWEALTH DRIVE, SUITE
 101
City-State-Zip: WARRENDALE PA 15086

Title DIRECTOR
Name ZADRAZIL, MARTIN
Address 765 COMMONWEALTH DRIVE, SUITE
 101
City-State-Zip: WARRENDALE PA 15086

Title PRESIDENT
Name HAWKINSON, GARY L
Address 765 COMMONWEALTH DRIVE, SUITE
 101
City-State-Zip: WARRENDALE PA 15086

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: CYNTHIA D OWENS

SECRETARY

04/16/2020

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date