## 2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000004137

Entity Name: ONPROCESS TECHNOLOGY, INC.

**Current Principal Place of Business:** 

200 HOMER AVENUE ASHLAND. MA 01721

**Current Mailing Address:** 

200 HOMER AVENUE ASHLAND, MA 01721

FEI Number: 04-3406986 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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

FILED Feb 20, 2019

**Secretary of State** 

5855931883CC

Officer/Director Detail:

Title PRESIDENT Title DIRECTOR

Name WOODEN, MICHAEL Name RICHARDSON, STEVEN M

Address 200 HOMER AVE Address 165 VILLAGE ST

City-State-Zip: ASHLAND MA 01721 City-State-Zip: MEDWAY MA 02053

Title DIRECTOR Title DIRECTOR

Name ANGLES, VICTOR MAARTINEZ Name AGGARWAL, LALIT

Address 27B LINDSTROM ROAD Address C-10 1ST FLOOR EXN PART 2

City-State-Zip: STAMFORD CT 06902 City-State-Zip: NEW DEHLI INDIA

Title DIRECTOR Title SECRETARY

Name BHAYANA, ROHIT Name BRUCKMANN, ROBERT J

Address 64 SECTOR 14 GURGAON Address 200 HOMER AVENUE

City-State-Zip: GURGAON INDIA 122001 City-State-Zip: ASHLAND MA 01721

TitleDIRECTORTitleDIRECTORNameBOYER, FRANKNameLOPEZ, PETERAddress5870 MOUNTAIN MAHOGANY LANEAddress430 WEST ROAD

City-State-Zip: JACKSON WY 83001 City-State-Zip: RICHMOND MA 02154

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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: STEVEN M. RICHARDSON

DIRECTOR

02/20/2019

Date

Electronic Signature of Signing Officer/Director Detail

## Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name WOODEN, MICHAEL Name BRUCKMANN, ROBERT J

Address 200 HOMER AVENUE Address 200 HOMER AVENUE City-State-Zip: ASHLAND MA 01721 City-State-Zip: ASHLAND MA 01721