

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000004614

Entity Name: SYSTECON SUPPRESSION SYSTEMS, INC.

Current Principal Place of Business:

8686 SOUTHWEST PARKWAY
HARRISON, OH 45030

Current Mailing Address:

8686 SOUTHWEST PARKWAY
HARRISON, OH 45030 US

FEI Number: 26-2181517

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

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: TERRIE BATES, ASSISTANT SECRETARY

03/15/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name PEREZ, CARLOS ENRIQUE
Address 8686 SOUTHWEST PARKWAY
City-State-Zip: HARRISON OH 45030

Title DIRECTOR
Name BECKER, RUSSELL A.
Address 8686 SOUTHWEST PARKWAY
City-State-Zip: HARRISON OH 45030

Title SECRETARY, DIRECTOR
Name LAMBERT, LOUIS
Address 8686 SOUTHWEST PARKWAY
City-State-Zip: HARRISON OH 45030

Title TREASURER
Name BETTMANN, KRISTEN
Address 8686 SOUTHWEST PARKWAY
City-State-Zip: HARRISON OH 45030

Title CHIEF EXECUTIVE OFFICER AND
PRESIDENT
Name COPENHAVE, SEAN
Address 8686 SOUTHWEST PARKWAY
City-State-Zip: HARRISON OH 45030

Title ASST. TREASURER
Name HLAVACH, STEPHEN
Address 8686 SOUTHWEST PARKWAY
City-State-Zip: HARRISON OH 45030

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: LAMBERT, LOUIS

SECRETARY

03/15/2023

Electronic Signature of Signing Officer/Director Detail

Date