

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F16000003609

**Entity Name:** VINTEK, INC.

**Current Principal Place of Business:**

6205-A PEACHTREE DUNWOODY ROAD  
ATLANTA, GA 30328

**Current Mailing Address:**

6205-A PEACHTREE DUNWOODY ROAD  
ATLANTA, GA 30328 US

**FEI Number:** 23-2621564

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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            PRESIDENT, DIRECTOR  
Name            ROWLEY, STEPHEN M.  
Address        6205-A PEACHTREE DUNWOODY  
                  ROAD  
City-State-Zip: ATLANTA GA 30328

Title            SECRETARY, DIRECTOR  
Name            HIGHTOWER, JENNIFER  
Address        6205-A PEACHTREE DUNWOODY  
                  ROAD  
City-State-Zip: ATLANTA GA 30328

Title            VP  
Name            VICKERS, MARY A  
Address        6205-A PEACHTREE DUNWOODY  
                  ROAD  
City-State-Zip: ATLANTA GA 30328

Title            TREASURER, VP  
Name            FRIEDMAN, MARIA L.  
Address        6205-A PEACHTREE DUNWOODY  
                  ROAD  
City-State-Zip: ATLANTA GA 30328

Title            EVP, DIRECTOR  
Name            BOWSER, MARK F.  
Address        6205-A PEACHTREE DUNWOODY  
                  ROAD  
City-State-Zip: ATLANTA GA 30328

Title            ASST. SECRETARY  
Name            AVILA, LUIS A.  
Address        6205-A PEACHTREE DUNWOODY  
                  ROAD  
City-State-Zip: ATLANTA GA 30328

*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:** LUIS A. AVILA

**ASST. SECRETARY**

**04/23/2022**

Electronic Signature of Signing Officer/Director Detail

Date