

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000003853

Entity Name: CERNOSTICS, INC.

Current Principal Place of Business:

235 WILLIAM PITT WAY
PITTSBURGH, PA 15238

Current Mailing Address:

235 WILLIAM PITT WAY
PITTSBURGH, PA 15238 US

FEI Number: 26-3438110

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC
7901 4TH STREET N,
SUITE 300
ST.PETERSBURG, FL 33702 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 | VCP |
| Name | HOERRES, MICHAEL J |
| Address | 116 RESEARCH DR |
| City-State-Zip: | BETHLEHEM PA 18015 |
| Title | V |
| Name | CRITCHLEY-THORNE, REBECCA |
| Address | 116 RESEARCH DR |
| City-State-Zip: | BETHLEHEM PA 18015 |

| | |
|-----------------|----------------------|
| Title | D |
| Name | DOHENY, NOEL |
| Address | 116 RESEARCH DR |
| City-State-Zip: | BETHLEHEM PA 18015 |
| Title | DIRECTOR |
| Name | WILLIS, TOM |
| Address | 235 WILLIAM PITT WAY |
| City-State-Zip: | PITTSBURGH PA 15238 |

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: MICHAEL J. HOERRES

**CHIEF EXECUTIVE
OFFICER**

06/30/2020

Electronic Signature of Signing Officer/Director Detail

Date