

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F18000000821

Entity Name: BREAKER TECHNOLOGY, INC.**Current Principal Place of Business:**30625 SOLON INDUSTRIAL PKWY
SOLON, OH 44139-4389**Current Mailing Address:**605 CHESTNUT ST., STE 1700
ATTN.: AMF
CHATTANOOGA, TN 37450-0019 US**FEI Number:** 62-1788929**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**Officer/Director Detail :**

Title	DP
Name	SISSONS, DONALD J
Address	30625 SOLON INDUSTRIAL PKWY
City-State-Zip:	SOLON OH 44139-4389

Title	S
Name	ANDERSON, STEPHEN C
Address	1725 SHEPHERD RD
City-State-Zip:	CHATTANOOGA TN 37421-2947

Title	T
Name	SILVIOUS, DAVID C
Address	1725 SHEPHERD RD
City-State-Zip:	CHATTANOOGA TN 37421-2947

Title	DIRECTOR
Name	DORRIS, RICHARD J.
Address	4101 JEROME AVE
City-State-Zip:	CHATTANOOGA TN 37407-2915

Title	DIRECTOR
Name	SCHWARZ, JEFFREY M.
Address	4101 JEROME AVE
City-State-Zip:	CHATTANOOGA TN 37407-2915

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: STEPHEN C. ANDERSON**SECRETARY****04/19/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date