

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F22000002420

**Entity Name:** FACTORIAL ENERGY INC.

**Current Principal Place of Business:**

19 PRESIDENTIAL WAY  
WOBURN, MA 01801

**Current Mailing Address:**

19 PRESIDENTIAL WAY  
WOBURN, MA 01801 US

**FEI Number:** 84-2520648

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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 DIRECTOR  
Name YU, ALEX  
Address 19 PRESIDENTIAL WAY  
City-State-Zip: WOBURN MA 01801

Title TREASURER  
Name FISCHER, EMLLEN  
Address 19 PRESIDENTIAL WAY  
City-State-Zip: WOBURN MA 01801

Title SECRETARY  
Name DUVA, JASON  
Address 19 PRESIDENTIAL WAY  
City-State-Zip: WOBURN MA 01801

Title DIRECTOR  
Name TAYLOR, JOE  
Address 19 PRESIDENTIAL WAY  
City-State-Zip: WOBURN MA 01801

Title DIRECTOR  
Name MEIDAR, LIAD  
Address 19 PRESIDENTIAL WAY  
City-State-Zip: WOBURN MA 01801

Title DIRECTOR  
Name BLY, MICHAEL  
Address 19 PRESIDENTIAL WAY  
City-State-Zip: WOBURN MA 01801

Title DIRECTOR  
Name SAHAY, PRAVEEN  
Address 19 PRESIDENTIAL WAY  
City-State-Zip: WOBURN MA 01801

Title PRESIDENT  
Name HUANG, SIYU  
Address 19 PRESIDENTIAL WAY  
City-State-Zip: WOBURN MA 01801

**Continues on page 2**

*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:** SIYU HUANG

**PRESIDENT**

**04/23/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           KELLER, UWE  
Address        19 PRESIDENTIAL WAY  
City-State-Zip: WOBURN MA 01801