

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000002386

Entity Name: AMERICAN BRIDGE COMPANY

Current Principal Place of Business:

1000 AMERICAN BRIDGE WAY
CORAOPOLIS, PA 15108

Current Mailing Address:

1000 AMERICAN BRIDGE WAY
CORAOPOLIS, PA 15108

FEI Number: 25-1607500

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title ASSISTANT TREASURER
Name SIBLE, KENNETH
Address 1000 AMERICAN BRIDGE WAY
City-State-Zip: CORAOPOLIS PA 15108

Title ASSISTANT SECRETARY
Name VAN HORN, JIM
Address 1000 AMERICAN BRIDGE WAY
City-State-Zip: CORAOPOLIS PA 15108

Title CEO, DIRECTOR
Name RENDA, FRANKIE
Address 1000 AMERICAN BRIDGE WAY
City-State-Zip: CORAOPOLIS PA 15108

Title COO, DIRECTOR
Name RENDA, RUDOLPH V.
Address 1000 AMERICAN BRIDGE WAY
City-State-Zip: CORAOPOLIS PA 15108

Title COO, DIRECTOR
Name WINN, WALTER TIMOTHY
Address 1000 AMERICAN BRIDGE WAY
City-State-Zip: CORAOPOLIS PA 15108

Title CFO, SECRETARY, TREASURER,
DIRECTOR
Name GALLARDA, CODY
Address 1000 AMERICAN BRIDGE WAY
City-State-Zip: CORAOPOLIS PA 15108

Title COO
Name HENDERSON, RICHARD
Address 1000 AMERICAN BRIDGE WAY
City-State-Zip: CORAOPOLIS PA 15108

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: KENNETH SIBLE

ASSISTANT TREASURER 04/30/2021

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date