

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P20000035176

**Entity Name:** TECHNICAL-LINK NORTH AMERICA INC.

**Current Principal Place of Business:**

8461 LAKE WORTH RD.  
225  
LAKE WORTH, FL 33467

**Current Mailing Address:**

8461 LAKE WORTH RD.  
225  
LAKE WORTH, FL 33467 US

**FEI Number:** 85-1056847

**Certificate of Status Desired:** No

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

UNITED STATES CORPORATION AGENTS, INC.  
5575 S. SEMORAN BLVD.  
SUITE 36  
ORLANDO, FL 32822 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 P, T  
Name MESSANA, CHRISTIAN J  
Address 8461 LAKE WORTH RD., SUITE 225  
City-State-Zip: LAKE WORTH FL 33467

Title SECRETARY  
Name MESSANA, CHRISTIAN  
Address 8461 LAKE WORTH RD., SUITE 225  
City-State-Zip: LAKE WORTH FL 33467

Title D  
Name MESSANA, CHRISTIAN J  
Address 8461 LAKE WORTH RD., SUITE 225  
City-State-Zip: LAKE WORTH FL 33467

*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:** CHRISTIAN JOSEPH MESSANA

**PRESIDENT**

**06/03/2021**

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

\_\_\_\_\_  
Date