

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F03000001829

**Entity Name:** CONSTRUCTION SPECIALTIES, INC.**Current Principal Place of Business:**3 WERNER WAY  
LEBANON, NJ 08833**Current Mailing Address:**3 WERNER WAY  
LEBANON, NJ 08833**FEI Number:** 16-1644002**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**THOMSON, DAVID  
5450 NW 33RD AVE, SUITE 110  
FORT LAUDERDALE, FL 33309 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            PRESIDENT, CEO, CFO  
Name            HAKES, THOMAS  
Address        3 WERNER WAY  
City-State-Zip: LEBANON NJ 08833

Title            VP  
Name            CLARK, FRANK  
Address        3 WERNER WAY  
City-State-Zip: LEBANON NJ 08833

Title            ASST. TREASURER  
Name            ZAHORCHAK, TINA  
Address        3 WERNER WAY  
City-State-Zip: LEBANON NJ 08833

Title            ASST. SECRETARY  
Name            GARA, JENNIFER  
Address        3 WERNER WAY  
City-State-Zip: LEBANON NJ 08833

Title            VP  
Name            LAPOINTE, ARTHUR  
Address        3 WERNER WAY  
City-State-Zip: LEBANON NJ 08833

Title            VP  
Name            NEIDIG, JOSEPH  
Address        3 WERNER WAY  
City-State-Zip: LEBANON NJ 08833

Title            VP  
Name            HAKES, THOMAS  
Address        3 WERNER WAY  
City-State-Zip: LEBANON NJ 08833

Title            SECRETARY  
Name            HALLOCK, WILLIAM  
Address        3 WERNER WAY  
City-State-Zip: LEBANON NJ 08833

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*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:** JENNIFER L. GARA**ASST. SECRETARY****01/02/2019**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title NORTH AMERICAN COMPTROLLER  
Name GEIGER, MATTHEW  
Address 3 WERNER WAY  
City-State-Zip: LEBANON NJ 08833

Title TREASURER  
Name HAKES, THOMAS B.  
Address 3 WERNER WAY  
City-State-Zip: LEBANON NJ 08833

Title VP  
Name WEIDMAN, ERIC  
Address 3 WERNER WAY  
City-State-Zip: LEBANON NJ 08833

Title CONTROLLER  
Name CLARK, FRANK  
Address 3 WERNER WAY  
City-State-Zip: LEBANON NJ 08833