

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F08000002706

**Entity Name:** SPECTRO ANALYTICAL INSTRUMENTS, INC.**Current Principal Place of Business:**91 MCKEE DRIVE  
MAHWAH, NJ 07430**Current Mailing Address:**1100 CASSATT ROAD  
BERWYN, PA 19312 US**FEI Number: 74-2884344****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS ST  
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           | SECRETARY           | Title           | DIRECTOR, TREASURER |
| Name            | CARINO, LYNN        | Name            | PURI , DALIP M.     |
| Address         | 1100 CASSATT ROAD   | Address         | 1100 CASSATT ROAD   |
| City-State-Zip: | BERWYN PA 19312     | City-State-Zip: | BERWYN PA 19312     |
| <br>            |                     | <br>            |                     |
| Title           | ASSISTANT TREASURER | Title           | PRESIDENT           |
| Name            | FRANK, DAVID A.     | Name            | SAMYN, DAVID R.     |
| Address         | 1100 CASSATT ROAD   | Address         | 1100 CASSATT ROAD   |
| City-State-Zip: | BERWYN PA 19312     | City-State-Zip: | BERWYN PA 19312     |
| <br>            |                     | <br>            |                     |
| Title           | VICE PRESIDENT      | Title           | DIRECTOR            |
| Name            | FEIT, ROBERT S.     | Name            | CIAMPITTI, TONY J.  |
| Address         | 1100 CASSATT ROAD   | Address         | 1100 CASSATT ROAD   |
| City-State-Zip: | BERWYN PA 19312     | City-State-Zip: | BERWYN PA 19312     |

*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: DAVID A. FRANK****ASSISTANT TREASURER 04/19/2022**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date