

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000004322

**Entity Name:** ELEMENT SIX TECHNOLOGIES US CORPORATION

**Current Principal Place of Business:**

24900 PITKIN RD  
250  
SPRING, TX 77386

**Current Mailing Address:**

24900 PITKIN RD  
250  
SPRING, TX 77386 US

**FEI Number:** 13-3047777

**Certificate of Status Desired:** No

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

COGENCY GLOBAL INC.  
155 N CALHOUN ST #4  
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           TREASURER  
Name           BURKE, LORRAINE  
Address        24900 PITKIN RD  
                  250  
City-State-Zip: SPRING TX 77386

Title           DIRECTOR  
Name           DUFFY, SIOBHAN  
Address        24900 PITKIN RD  
                  250  
City-State-Zip: SPRING TX 77386

Title           DIRECTOR  
Name           BOWES, CHRIS  
Address        24900 PITKIN RD  
                  250  
City-State-Zip: SPRING TX 77386

Title           DIRECTOR  
Name           TWITCHEN, DANIEL  
Address        24900 PITKIN RD  
                  250  
City-State-Zip: SPRING TX 77386

Title           DIRECTOR  
Name           OBELOER, THOMAS  
Address        24900 PITKIN RD  
                  250  
City-State-Zip: SPRING TX 77386

Title           SECRETARY  
Name           SHAVE, YVONNE  
Address        24900 PITKIN RD  
                  250  
City-State-Zip: SPRING TX 77386

Title           DIRECTOR, PRESIDENT  
Name           ZARRIN, HOSSEIN  
Address        24900 PITKIN RD  
                  250  
City-State-Zip: SPRING TX 77386

*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: LORRAINE BURKE**

**TREASURER**

**04/26/2022**

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

\_\_\_\_\_  
Date