

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F17000002982

Entity Name: MASTECH INFOTRELLIS, INC.**Current Principal Place of Business:**1305 CHERRINGTON PKWY, BLDG 210 SUITE 400
MOON TOWNSHIP, PA 15108**Current Mailing Address:**1305 CHERRINGTON PKWY, BLDG 210 SUITE 400
MOON TOWNSHIP, PA 15108 US**FEI Number:** 82-1928123**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COGENCY GLOBAL INC.
115 NORTH CALHOUN ST., STE. 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	DP
Name	GUPTA, VIVEK
Address	1305 CHERRINGTON PKWY, BLDG 210 SUITE 400
City-State-Zip:	MOON TOWNSHIP PA 15108

Title	ST
Name	CRONIN, JOHN J JR
Address	1305 CHERRINGTON PKWY, BLDG 210 SUITE 400
City-State-Zip:	MOON TOWNSHIP PA 15108

Title	D
Name	WADHWANI, SUNIL
Address	1305 CHERRINGTON PKWY, BLDG 210 SUITE 400
City-State-Zip:	MOON TOWNSHIP PA 15108

Title	D
Name	TRIVEDI, ASHOK
Address	1305 CHERRINGTON PKWY, BLDG 210 SUITE 400
City-State-Zip:	MOON TOWNSHIP PA 15108

Title	ASST. SECRETARY
Name	LACEY, JENNIFER FORD
Address	1305 CHERRINGTON PARKWAY BLDG. 210
City-State-Zip:	MOON TOWNSHIP 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: JOHN J CRONIN**SECRETARY****04/26/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date