

2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F19000003036

Entity Name: BYK USA INC.**Current Principal Place of Business:**524 SOUTH CHERRY STREET
WALLINGFORD, CT 06492**Current Mailing Address:**524 SOUTH CHERRY STREET
WALLINGFORD, CT 06492 US**FEI Number:** 13-1978006**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 VP OPERATIONS
Name DUGGER, JEFF
Address 524 SOUTH CHERRY STREET
City-State-Zip: WALLINGFORD CT 06492

Title DIRECTOR
Name DR. BOINOWITZ, TAMMO
Address 524 SOUTH CHERRY STREET
City-State-Zip: WALLINGFORD CT 06492

Title DIRECTOR
Name HINNERWISCH, JORG
Address 524 SOUTH CHERRY STREET
City-State-Zip: WALLINGFORD CT 06492

Title PRESIDENT/CEO
Name AVERY, ALISON
Address 524 SOUTH CHERRY STREET
City-State-Zip: WALLINGFORD CT 06492

Title CHAIRMAN OF THE BOARD
Name BOINOWITZ, TAMMO DR.
Address 524 SOUTH CHERRY STREET
City-State-Zip: WALLINGFORD CT 06492

Title VP SALES & MARKETING
Name ALESSANDRO, STEVE
Address 524 SOUTH CHERRY STREET
City-State-Zip: WALLINGFORD CT 06492

Title DIRECTOR
Name AVERY, ALISON
Address 524 SOUTH CHERRY STREET
City-State-Zip: WALLINGFORD CT 06492

Title SECRETARY
Name SCHAEFER, SARAH
Address 524 SOUTH CHERRY STREET
City-State-Zip: WALLINGFORD CT 06492

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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: SARAH SCHAEFER**SECRETARY****03/31/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title	CFO
Name	TRINK, UTE
Address	524 SOUTH CHERRY STREET
City-State-Zip:	WALLINGFORD CT 06492