

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000000116

Entity Name: TEL FSI, INC.**Current Principal Place of Business:**3455 LYMAN BOULEVARD
CHASKA, MN 55318**Current Mailing Address:**3455 LYMAN BOULEVARD
CHASKA, MN 55318 US**FEI Number:** 41-1223238**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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
Name VREELAND, DOUGLAS
Address 3455 LYMAN BOULEVARD
City-State-Zip: CHASKA MN 55318

Title DIRECTOR
Name ISHIDA, HIROSHI
Address 3455 LYMAN BOULEVARD
City-State-Zip: CHASKA MN 55318

Title DIRECTOR, PRESIDENT
Name DOUGHERTY, MARK
Address 3455 LYMAN BOULEVARD
City-State-Zip: CHASKA MN 55318

Title DIRECTOR
Name SHIRAI, KOKI
Address 3455 LYMAN BOULEVARD
City-State-Zip: CHASKA MN 55318

Title CFO
Name TURNER, RICHARD
Address 3455 LYMAN BOULEVARD
City-State-Zip: CHASKA MN 55318

Title DIRECTOR
Name SMITH, LARRY
Address 3455 LYMAN BOULEVARD
City-State-Zip: CHASKA MN 55318

Title DIRECTOR
Name KITANO, JUNICHI
Address 3455 LYMAN BOULEVARD
City-State-Zip: CHASKA MN 55318

Title DIRECTOR
Name YOKOMORI, NORITAKA
Address 3455 LYMAN BOULEVARD
City-State-Zip: CHASKA MN 55318

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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: DOUGLAS VREELAND**SECRETARY****02/01/2024**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	OKUBO, TAKESHI
Address	3455 LYMAN BOULEVARD
City-State-Zip:	CHASKA MN 55318