## 2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000004349

Entity Name: TESTAMERICA LABORATORIES, INC.

**Current Principal Place of Business:** 

4101 SHUFFEL STREET NW NORTH CANTON. OH 44720

**Current Mailing Address:** 

4101 SHUFFEL STREET NW NORTH CANTON, OH 44720 US

FEI Number: 23-2919996 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COGENCY GLOBAL INC. 115 NORTH CALHOUN STREET - 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

FILED Apr 30, 2021

**Secretary of State** 

7725160768CC

Officer/Director Detail:

Title CHAIRPERSON, PRESIDENT Title TREASUER

NameWILLIAMS, BRIANNameVILLEMAIRE, HEATHERAddress2425 NEW HOLLAND PIKEAddress4101 SHUFFEL STREET NWCity-State-Zip:LANCASTER PA 17601City-State-Zip: NORTH CANTON OH 44720

Title VICE TREASURER Title SECRETARY

NameFASSBENDER, RALFNameCONICELLA, FRANKAddress2425 NEW HOLLAND PIKEAddress343 WEST MAIN STREET

City-State-Zip: LANCASTER PA 17601 City-State-Zip: LEOLA PA 17540

Title TAX DIRECTOR Title DIRECTOR AND CHIEF OPERATING

OFFICER

Name DUDAS, JUSTIN Name HOPPER, STEVE

Address 343 WEST MAIN STREET Address 4101 SHUFFEL STREET NW
City-State-Zip: LEOLA PA 17540 City-State-Zip: NORTH CANTON OH 44720

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: RALF FASSBENDER VICE TREASURER

Electronic Signature of Signing Officer/Director Detail

04/30/2021 Date