

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F14000002494

**Entity Name:** OMNETRIC CORP.

**Current Principal Place of Business:**

10900 WAYZATA BLVD  
STE 400  
MINNETONKA, MN 55305

**Current Mailing Address:**

3850 QUADRANGLE BLVD.  
US TAX DEPT, MS AFS466  
ORLANDO, FL 32817 US

**FEI Number:** 46-5157068

**Certificate of Status Desired:** No

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

C T 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 SECRETARY  
Name YAZVEC, MICHAEL  
Address 10900 WAYZATA BLVD  
STE 400  
City-State-Zip: MINNETONKA MN 55305

Title VP, CFO  
Name MATULA, DAVID  
Address 10900 WAYZATA BLVD  
STE 400  
City-State-Zip: MINNETONKA MN 55305

Title ASST. SECRETARY  
Name ELLIS, LONNIE J  
Address 170 WOOD AVE SOUTH  
City-State-Zip: ISELIN NJ 08830

Title CEO, PRESIDENT, DIRECTOR  
Name TOUBASSI, JOHN  
Address 10900 WAYZATA BLVD  
STE 400  
City-State-Zip: MINNETONKA MN 55305

Title DIRECTOR  
Name KOHLERT, DANIEL  
Address 10900 WAYZATA BLVD  
STE 400  
City-State-Zip: MINNETONKA MN 55305

*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:** LONNIE J. ELLIS

**ASST. SECRETARY**

**02/26/2020**

Electronic Signature of Signing Officer/Director Detail

Date