

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jan 30 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # J46369 (1)

1. Corporation Name
~~COMPUTER PROFESSIONALS, INC.~~
MODIS, INC.

Principal Place of Business 54 MARINA ROAD LAKE WYLIE SC 29710 US	Mailing Address 177 Crossways Park Dr. Woodbury, NY 11797
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 Sulte, Apt. #, etc.	26 Sulte, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

3. Date Incorporated or Qualified 12/10/1986	
4. FEI Number 65-0000600	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	CEO	<input checked="" type="checkbox"/> DELETE
NAME	HOSHKO, THOMAS E.	
STREET ADDRESS	54 MARINA ROAD	
CITY-ST-ZIP	LAKE WYLIE SC	
TITLE	VPCF	<input checked="" type="checkbox"/> DELETE
NAME	TETTERTON, PHILLIP	
STREET ADDRESS	54 MARINA ROAD	
CITY-ST-ZIP	LAKE WYLIE SC	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRES	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	TIMOTHY PAINF	
1.3 STREET ADDRESS	One Independent Drive	
1.4 CITY-ST-ZIP	Jacksonville, FL 32202	
2.1 TITLE	CEO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	DEWAN, DEREK E.	
2.3 STREET ADDRESS	One Independent Drive	
2.4 CITY-ST-ZIP	Jacksonville, FL 32202	
3.1 TITLE	TREAS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	ABNEY, MICHAEL J.	
3.3 STREET ADDRESS	One Independent Drive	
3.4 CITY-ST-ZIP	Jacksonville, FL 32202	
4.1 TITLE	SEC.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	MAYO, MARC M.	
4.3 STREET ADDRESS	One Independent Drive	
4.4 CITY-ST-ZIP	Jacksonville, FL 32202	
5.1 TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	CALABRO, ROBERT	
5.3 STREET ADDRESS	177 CROSSWAYS PARK DR	
5.4 CITY-ST-ZIP	WOODBURY, NY 11797	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **ROBERT CALABRO** *1/14/98*

CR2E034 (10/97)