

2018 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P40939

Entity Name: MODULAR SPACE CORPORATION**Current Principal Place of Business:**1200 SWEDESFORD ROAD
BERWYN, PA 19312**Current Mailing Address:**1200 SWEDESFORD ROAD
BERWYN, PA 19312 US**FEI Number:** 54-1375284**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 PRESIDENT, CEO, DIRECTOR
Name SOULTZ, BRADLEY L.
Address 1200 SWEDESFORD RD
City-State-Zip: BERWYN PA 19312

Title TREASURER, CHIEF ACCOUNTING
 OFFICER
Name SHANKS, SALLY J.
Address 1200 SWEDESFORD ROAD
City-State-Zip: BERWYN PA 19312

Title TITLE ADMINISTRATOR
Name ALLEN, CARMELITA (CARMEN)
Address 1200 SWEDESFORD ROAD
City-State-Zip: BERWYN PA 19312

Title VP, SECRETARY, GENERAL
 COUNSEL, DIRECTOR
Name BACON, BRADLEY L.
Address 1200 SWEDESFORD ROAD
City-State-Zip: BERWYN PA 19312

Title VP, CONTROLLER, ASSISTANT
 SECRETARY
Name FURLONG, JOHN
Address 1200 SWEDESFORD ROAD
City-State-Zip: BERWYN PA 19312

Title TITLE ADMINISTRATOR
Name DICOLA, MARY
Address 1200 SWEDESFORD ROAD
City-State-Zip: BERWYN PA 19312

Title CONTRACTS/LICENSING DIRECTOR
Name GULLOTTI, GLENN
Address 1200 SWEDESFORD ROAD
City-State-Zip: BERWYN PA 19312

Title ASSISTANT SECRETARY
Name BISHOP, SAMANTHA
Address 1200 SWEDESFORD ROAD
City-State-Zip: BERWYN PA 19312

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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: JOHN FURLONG**VP, CONTROLLER,
ASSISTANT SECRETARY****10/04/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title	CFO, DIRECTOR
Name	BOSWELL, TIMOTHY D.
Address	1200 SWEDESFORD ROAD
City-State-Zip:	BERWYN PA 19312