## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01000001479

City-St-Zip:

NEW YORK, NY 10038

Entity Name: ALGOMOD TECHNOLOGIES CORPORATION

FILED Jan 14, 2009 Secretary of State

Littly Nai	IIIe. ALGOIVI	JD TECHNOLOGIES CORPOR	RATION			
Current Principal Place of Business:				New Principal Place of Business:		
116 JOHN STREET, SUITE 1406 NEW YORK, NY 10038				116 JOHN STREET SUITE 1406 NEW YORK, NY 10038		
Current Mailing Address:				New Mailing Address:		
116 JOHN STREET, SUITE 1406 NEW YORK, NY 10038				116 JOHN STREET SUITE 1406 NEW YORK, NY 10038		
FEI Number:	: 11-2447843	FEI Number Applied For ( )	FEI Nun	nber Not Applicable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
CARPENTER, NANCI 5840 RED BUG LAKE ROAD SUITE 365 WINTER SPRINGS, FL 32708 US				CARPENTER, NANCI 2105 KNOLLVIEW CT OVIEDO, FL 32765 US		
The above in the State	named entity of Florida.	submits this statement for the	purpose o	f changing its registered	office or registered agent, or both,	
SIGNATURE: NANCI CARPENTER				01/14/2009		
Electronic Signature of Registered Agent				Date		
Election Car	npaign Financir	ng Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	OBEID, DIYA	) Delete REET, SUITE 1406 NY 10038		Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP ( LIU, GENE 10 FRANCIS ( CHESHIRE, C			Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	
Title: Name: Address:	P ( OBEID, TANIA 116 JOHN STI			Title: ( Name: Address:	) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

City-St-Zip:

SIGNATURE: DIYA OBEID CEO 01/14/2009