2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2009
Secretary of State

DOCUMENT# F07000003904

Entity Name: MODULAR MAILING SYSTEMS, INC.

Current Principal Place of Business:

4913 W. LAUREL ST.
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

C/O HASLER, INC., 478 WHEELERS FARMS RD
MILFORD, CT 06461

New Mailing Address:

FEI Number: 26-0603182 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR STE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: VAVRA, JOHN
Address: 478 WHEELERS FARMS RD
City-St-Zip: MILFORD, CT 06461

Title: D ( ) Delete
Name: CRUDO, FRANK
Address: 478 WHEELERS FARMS RD
City-St-Zip: MILFORD, CT 06461

Title: PST ( ) Delete
Name: FERRANTE, THOMAS
Address: 4913 W. LAUREL ST.
City-St-Zip: TAMPA, FL 33607

Title: D ( ) Delete
Name: BONASSAR, JOSEPH
Address: 478 WHEELERS FARMS RD
City-St-Zip: MILFORD, CT 06461

Title: D (X) Delete
Name: SPRECHER, WILLIAM
Address: 4913 W. LAUREL ST.
City-St-Zip: TAMPA, FL 33607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: FERRANTE, THOMAS
Address: 478 WHEELERS FARMS RD
City-St-Zip: MILFORD, CT 06461

Title: D (X) Change ( ) Addition
Name: BONASSAR, JOSEPH
Address: 478 WHEELERS FARMS RD
City-St-Zip: MILFORD, CT 06461

Title: D (X) Change ( ) Addition
Name: SPRECHER, WILLIAM
Address: 478 WHEELERS FARMS ROAD
City-St-Zip: MILFORD, CT 06461

Title: D (X) Change ( ) Addition
Name: SINGER, JAY
Address: 478 WHEELERS FARMS RD
City-St-Zip: MILFORD, CT 06461

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: JOSEPH BONASSAR D 04/22/2009

Electronic Signature of Signing Officer or Director — Date