

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000004566

Entity Name: MODCOMP INC.

FILED  
Sep 14, 2006  
Secretary of State

## Current Principal Place of Business:

1500 S POWERLINE ROAD  
DEERFIELD BEACH, FL 33442

## New Principal Place of Business:

## Current Mailing Address:

1500 S POWERLINE ROAD  
DEERFIELD BEACH, FL 33442

## New Mailing Address:

FEI Number: 58-2336703

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: TVD ( ) Delete  
Name: MORA, FAUSTINO  
Address: 1500 S POWERLINE ROAD  
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: SOD ( ) Delete  
Name: LEVINE, GARY W  
Address: 43 MANNING RD  
City-St-Zip: BILLERICA, MA 01821

Title: PCEO ( ) Delete  
Name: LUPINETTI, ALEXANDER R  
Address: 43 MANNING RD  
City-St-Zip: BILLERICA, MA 01821

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: MIKE NEWBANKS

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09/14/2006

Electronic Signature of Signing Officer or Director

Date