

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000064661

FILED
Apr 22, 2009
Secretary of State

Entity Name: MIDICOMP-PLEXTOR USA, INC.

Current Principal Place of Business:

917 PIPERS CAY DR.
WEST PALM BEACH, FL 33415

New Principal Place of Business:

2100 BLUE SPRINGS RD.
WEST PALM BEACH, FL 33411

Current Mailing Address:

917 PIPERS CAY DR.
WEST PALM BEACH, FL 33415

New Mailing Address:

2100 BLUE SPRINGS RD.
WEST PALM BEACH, FL 33411

FEI Number: 65-1045135

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEZEI, ISTVAN L
721 US HWY 1 SUITE 122
NORTH PALM BEACH, FL 33408 US

Name and Address of New Registered Agent:

MEZEI, ISTVAN L
2100 BLUE SPRINGS RD
WEST PALM BEACH, FL 33411 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: ISTVAN MEZEI

04/22/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MEZEI, ISTVAN L
Address: 721 US HWY 1 SUITE 122
City-St-Zip: NORTH PALM BEACH, FL 33408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MEZEI, ISTVAN L
Address: 2100 BLUE SPRINGS RD
City-St-Zip: WEST PALM BEACH, FL 33411

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: ISTVAN MEZEI

D

04/22/2009

Electronic Signature of Signing Officer or Director

Date