2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S75766

Entity Name: KODATA CORPORATION

FILED Apr 28, 2009 Secretary of State

| Current Principal Place of Business: | | | New Princ | New Principal Place of Business: | | |
|---|---|-------------------------------------|---|--|--|--|
| | AKLAND PA | RK BLVD. | | | | |
| 201 SUNRISE, | FL 33351 | US | | | | |
| Current Mailing Address: | | | New Maili | New Mailing Address: | | |
| 8360 W. OAKLAND PARK BLVD. | | | | | | |
| 201 SUNRISE, | FL 33351 | US | | | | |
| | : 65-0297243 | FEI Number Applied For () | FEI Number Not Appl | icable () Certificate of Status Desired () | | |
| Name and | Address of | Current Registered Agent: | Name and | Address of New Registered Agent: | | |
| SUITE 302 FT LAUDE | PRESS CRE PRDALE, FL | 33309 US | | | | |
| | named entit e of Florida. | y submits this statement for the p | urpose of changing it | s registered office or registered agent, or both, | | |
| SIGNATU | RE: | | | | | |
| | Electr | onic Signature of Registered Age | ent | Date | | |
| Election Car | npaign Financ | ing Trust Fund Contribution (). | | | | |
| OFFICERS AND DIRECTORS: | | | ADDITION | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: City-St-Zip: | P MENDIOLA, 626 VERONA WESTON, FI | \ PL | Title: Name: Address: City-St-Zip: | () Change () Addition | | |
| Title: Name: Address: City-St-Zip: | DVP YARNELL, K 10173 S.W.: COOPER CI | 51ST AVE. | Title: Name: Address: City-St-Zip: | () Change () Addition | | |
| Title: Name: Address: City-St-Zip: | ZOUR, ISRAI | ()Delete EL CAYNE BLVD., #202 | Title: Name: Address: City-St-Zip: | DT (X) Change () Addition ZOUR, ISRAEL 1000 E ISLAND BLVD AVENTURA, FL | | |
| Title: Name: Address: City-St-Zip: | MENDIOLA, 4 1431 NW 13 | | Title: Name: Address: City-St-Zip: | () Change () Addition | | |
| Title: Name: Address: City-St-Zip: | S KADOCH, MI 1250 NW FL PLANTATION | AMINGO RD | Title: Name: Address: City-St-Zip: | () 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.

SIGNATURE: ISRAEL ZOUR DT 04/28/2009