



State of Rhode Island
Department of State - Business Services Division

FILED

Annual Report for the year: 2021
Corporation

MAR 5 2021

BY *[Signature]* 1127

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

1. Entity ID Number 288589		2. Exact name of the Corporation MOD Data Tech Inc			
3. Principal Office Address 155 Park Ave, Unit 8			City Cranston	State RI	Zip 02905
4. NAICS Code 541330		6. Brief description of the character of business conducted in Rhode Island Consulting and data services.			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Marlon Omar DePaz			Vice-President Name		
Street Address 155 Park Ave, Unit 8			Street Address		
City Cranston	State RI	Zip 02905	City	State	Zip
Secretary Name Olga Aracely DePaz			Treasurer Name Marlon Omar DePaz		
Street Address 5202 Landsman Ave			Street Address 155 Park Ave, Unit 8		
City Tampa	State FL	Zip 33625	City Cranston	State RI	Zip 02905
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing.			10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>		
		NUMBER OF SHARES	CLASS/SERIES	PAR VALUE	
		10	Common	\$1.00	
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.					
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
Name of Authorized Representative Marlon Omar DePaz, President				Date 2/26/2021	
Signature of Authorized Representative <i>[Signature]</i>					

MAIL TO:
 Division of Business Services
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