FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 9:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F93000000994 (4)**

1. Corporation Name

MODEX FLORIDA, INC.

Principal Place of Business	Mailing Address
1180 AVENUE OF THE AMERICAS 18TH FLOOR NEW YORK NY 10036-8401	1180 AVENUE OF THE AMERICAS 18TH FLOOR NEW YORK NY 10036-8401

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/23/1993	3a. Date of Last Report: 05/01/1994
4. FEI Number: 13-3696464	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / County 25	Zip 29 / County 30

9. Name and Address of Current Registered Agent

NATIONAL CORPORATE RESEARCH, LTD., INC.
1406 HAYS STREET
SUITE 2
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, type or print name of registered agent and the date of signature (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	☐ Change ☐ Addition
NAME	TANSEY, FRANCES X	12 NAME	
STREET ADDRESS	50 GLENBROOK RD.	13 STREET ADDRESS	
CITY-ST-ZIP	STAMFORD CT 06902	14 CITY-ST-ZIP	
TITLE	S	21 TITLE	☐ Change ☐ Addition
NAME	LUSKI, DAVID	22 NAME	
STREET ADDRESS	194 MOREHOUSE RD.	23 STREET ADDRESS	
CITY-ST-ZIP	EASTON CT 06612	24 CITY-ST-ZIP	
TITLE	T	31 TITLE	☐ Change ☐ Addition
NAME	LAVIN, JAMES	32 NAME	
STREET ADDRESS	258 RIVERSIDE DR.	33 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10025	34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ 4/27/95 (44) 764-3410
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone Number

0396400 FP

F93-0001

M.R. Weiser & Co. LLP
Certified Public Accountants
and Consultants

Offices in New York and New Jersey
135 West 50th Street
New York, NY 10020-1299
Tel 212 641-6700
Fax 212 641-6888

May 1, 1995

Division of Corporations
Annual Reports Section
P.O. Box 1500
Tallahassee, FL 32302-1500

Gentlemen:

Enclosed are the 1995 Corporation Annual Reports and the applicable payments for the following corporations:

Lodex Brickell, Inc.
Lodex Florida, Inc.
Lodex ImperiaLakes, Inc.
Modex Brickell, Inc.
Modex Florida, Inc.

Very truly yours

Bruce Silverman

cc: Brian Summers

Certified return receipt requested
#Z 367 909 712

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Moores Rowland
A worldwide association of independent accounting firms