

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000120055

Entity Name: MODI PARTNERS, LLC

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

701 E. FLETCHER AVENUE
TAMPA, FL 33612 US

New Principal Place of Business:

Current Mailing Address:

701 E. FLETCHER AVE,
TAMPA, FL 33612 US

New Mailing Address:

701 E. FLETCHER AVENUE
TAMPA, FL 33612 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MODI, BHAVIN
701 E. FLETCHER AVENUE
TAMPA, FL 33612 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

MANAGING MEMBERS/MANAGERS:

Title: CEO () Delete
Name: MODI, VIPUL
Address: 701 E. FLETCHER AVENUE
City-St-Zip: TAMPA, FL 33612 US

Title: VOM () Delete
Name: MODI, BHAVIN
Address: 701 E. FLETCHER AVENUE
City-St-Zip: TAMPA, FL 33612 US

Title: SEC. () Delete
Name: MODI, PRAVIN
Address: 7001 E. FLETCHER AVENUE
City-St-Zip: TAMPA, FL 33612 US

Title: CFO () Delete
Name: MODI, PRAVIN
Address: 701 E. FLETCHER AVENUE
City-St-Zip: TAMPA, FL 33612 US

ADDITIONS/CHANGES:

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

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 exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BHAVIN MODI

GM

04/30/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date