

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000099928

Entity Name: MODAS GAROCH, INC.

FILED
Jan 16, 2004
Secretary of State

Current Principal Place of Business:

120 SOUTHWEST 24TH ROAD
MIAMI, FL 33129

New Principal Place of Business:

2115 SW 3 AVE # 5
MIAMI, FL 33130

Current Mailing Address:

120 SOUTHWEST 24TH ROAD
MIAMI, FL 33129

New Mailing Address:

2115 SW 3 AVE. # 5
MIAMI, FL 33130

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

Name and Address of Current Registered Agent:

CHACON, DAVID
120 SOUTHWEST 24TH ROAD
MIAMI, FL 33129

Name and Address of New Registered Agent:

CHACON, DAVID
2115 SW 3 AVE # 5
MIAMI, FL 33130

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: DAVID CHACON

01/16/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CHACON, ROSELBA
Address: 120 SOUTHWEST 24TH ROAD
City-St-Zip: MIAMI, FL 33129

Title: VD () Delete
Name: HRNANDEZ, ANDRIENA
Address: 120 SOUTHWEST 24TH ROAD
City-St-Zip: MIAMI, FL 33129

Title: SD () Delete
Name: CHACON, DAVID
Address: 120 SOUTHWEST 24TH ROAD
City-St-Zip: MIAMI, FL 33129

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CHACON, ROSELBA
Address: 2115 SW 3 AVE # 5
City-St-Zip: MIAMI, FL 33130

Title: VD (X) Change () Addition
Name: HRNANDEZ, ANDRIENA
Address: 2115 SW 3 AVE # 5
City-St-Zip: MIAMI, FL 33130

Title: SD (X) Change () Addition
Name: CHACON, DAVID
Address: 2115 SW 3 AVE # 5
City-St-Zip: MIAMI, FL 33130

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DAVID CHACON

SD

01/16/2004

Electronic Signature of Signing Officer or Director

Date