## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000038836

Entity Name: MOD BROTHERS, INC.

FILED Apr 29, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1200 BRICKELL AVENUE SUITE 1440 1805 PONCE DE LEON BLVD. MIAMI, FL 33131

SUITE 500

CORAL GABLES,, FL 33134

**Current Mailing Address:** New Mailing Address:

1200 BRICKELL AVENUE SUITE 1440 1805 PONCE DE LEON BLVD. MIAMI, FL 33131

SUITE 500

CORAL GABLES, FL 33134

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CASTRO, CARLOS ALBERTO ESQ CASTRO, CARLOS ALBERTO ESQ. 1805 PONCE DE LEON BLVD. 1200 BRICKELL AVENUE SUITE 1440

SUITE 500 MIAMI, FL 33131 US CORAL GABLES, FL 33134 US

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: 04/29/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: ( ) Delete

MODESTO SUERO, ROBERTO J Name: Name: 1200 BRICKELL AVENUE SUITE 1440 Address: Address:

City-St-Zip: MIAMI, FL 33131

DV Title: ( ) Delete MODESTO SUERO, JOHN J Name:

1200 BRICKELL AVENUE SUITE 1440 Address:

MIAMI, FL 33131 City-St-Zip:

( ) Delete Title:

MODESTO DE SANCHEZ, AMALFI B Name: 1200 BRICKELL AVENUE SUITE 1440 Address:

City-St-Zip: MIAMI, FL 33131 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition MODESTO SUERO, ROBERTO J 1805 PONCE DE LEON BLVD. STE 500

City-St-Zip: CORAL GABLES, FL 33134

Title: (X) Change ( ) Addition

MODESTO SUERO, JOHN J Name:

1805 PONCE DE LEON BLVD. STE. 500 Address:

CORAL GABLES, FL 33134 City-St-Zip:

Title: (X) Change ( ) Addition MODESTO DE SANCHEZ, AMALFI B Name: 1805 PONCE DE LEON BLVD. STE 500 Address:

City-St-Zip: CORAL GABLES, FL 33134

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: MODESTO SUERO, ROBERTO J DP 04/29/2009