

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000120189

1. Entity Name
MODIM INC.



Principal Place of Business
477 COLLINS AVENUE
4308
MIAMI BEACH, FL 33140

Mailing Address
% ALLAN S BISK
4779 COLLINS AVE, SUITE 4308
MIAMI BEACH, FL 33140

FILED
Jul 22, 2008 08:00 AM
Secretary of State



07112008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-5567205	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

THE KARP LAW FIRM, P.A.
2875 PGA BOULEVARD
SUITE 100
PALM BEACH GARDENS, FL 33410

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and file if applicable

(NOTE: Registered Agent signature required when reconstating)

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	BISK, ALLAN S
STREET ADDRESS	2875 PGA BOULEVARD, SUITE 100
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33410

TITLE	PTS
NAME	BISK, ALLAN S
STREET ADDRESS	4779 COLLINS AVENUE SUITE 4308
CITY-ST-ZIP	MIAMI BEACH, FL 33140

TITLE	
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CITY-ST-ZIP	

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07/22/08-80011-027 158.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ALLAN S BISK PRESIDENT & DIRECTOR

7/16/08 (917) 566-3655
Date Daytime Phone #