

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000068408

FILED
Mar 31, 2009
Secretary of State

Entity Name: GMA MODIFICATION, CORP.

Current Principal Place of Business:

2185 NORTHEAST 163RD STREET
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

2185 NORTHEAST 163RD STREET
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: 26-3048635

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

SHENKAR, AVI
2185 NE 163 STREET
NORTH MIAMI BEACH, FL 33162 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: AVI SHENKAR

03/31/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SHENKAR, AVI
Address: 2185 NORTHEAST 163RD STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: VD () Delete
Name: TSIRELSON, MARAT
Address: 2185 NORTHEAST 163RD STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: D () Delete
Name: SHRAYEV, IGOR
Address: 2185 NORTHEAST 163RD STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: AVI SHENKAR

PD

03/31/2009

Electronic Signature of Signing Officer or Director

Date