

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003272

FILED  
Apr 06, 2009  
Secretary of State

Entity Name: HORENSTEIN DEVELOPMENTS INC.

## Current Principal Place of Business:

62 PINKAS ST  
TEL AVIV, ISRAEL, IS 62157

## New Principal Place of Business:

## Current Mailing Address:

C/O NADIA S. EDWARDS, CPA  
290 - 174 ST #815  
SUNNY ISLES BEACH, FL 33160

## New Mailing Address:

C/O NADIA S. EDWARDS, CPA  
290 - 174 ST #1919  
SUNNY ISLES BEACH, FL 33160

FEI Number: 98-0430974

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

EDWARDS, NADIA S CPA  
290 - 174 ST #815  
SUNNY ISLES BEACH, FL 33160 US

## Name and Address of New Registered Agent:

EDWARDS, NADIA S CPA  
290 - 174 ST #1919  
SUNNY ISLES BEACH, FL 33160 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:

04/06/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CDP ( ) Delete  
Name: HORENSTEIN, ELIAHU  
Address: 62 DINKAS ST  
City-St-Zip: TEL AVIV, ISRAEL,

Title: VP ( ) Delete  
Name: HORENSTEIN, CARMELA  
Address: 62 DINKAS ST  
City-St-Zip: TEL AVIV, ISRAEL,

Title: S ( ) Delete  
Name: HORENSTEIN, RONIT  
Address: 62 DINKAS ST  
City-St-Zip: TEL AVIV, ISRAEL,

Title: T ( ) Delete  
Name: HORENSTEIN, SHMUEL ORI  
Address: 62 DINKAS ST  
City-St-Zip: TEL AVIV, ISRAEL,

## 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:

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: ELIAHU HORENSTEIN

MMGR

04/06/2009

Electronic Signature of Signing Officer or Director

Date