2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 14, 2005 08:00 AM Secretary of State

	C C C C
DOCUMENT # P97000029008 1. Entity Name 9476 HARDING INVESTMENTS, INC.	Secretary of State
Principal Place of Business Mailing Address	
· · · · · · · · · · · · · · · · · · ·	
210-71 STREET 210-71 STREET	
STE 309 STE 309 MIAMI BEACH, FL 33141 MIAMI BEACH, FL 33141	
וואויוו סבאנת, דב 33141 יוואויוו סבאנת, דב 33141	וועם וועם ווים וועם ווים פובע נוועם בווער ווועם וועם וועם וועם וועם וועם וועם
DO NOT WRITE IN THIS SPA	02102005 No Chg-P CR2E034 (10/03)
DO NOT WHITE IN THIS SPA	4. FEI Number Applied For Not Applied For
	5. Certificate of Status Desired \$8.75 Additional
6. Name and Address of Current Registered Agent	Fee Required
YEHEZBEL, HAIM 207-71 STREET STE #309	DO NOT WRITE
MIAMI BEACH, FL 33141	
Tylin ton BE total a construction	IN THIS SPACE
8. The above named entity submits this statement for the purpose of changing its register	d office or registered agent, or both, in the State of Florida. I am familiar with, and accept
the obligations of registered agent.	
SIGNATURE HOUSE	
Signature: typed or printed name of registered agentyland title if applicable. (NOTE: Registered Agent signature required when refrestating) DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Final Trust Fund Contribution.	S5.00 May Be U00000229167 12/14/05-80070-006 150.00
10. OFFICERS AND DIRECTORS	
TITLE D	<u></u>
NAME YEHEZKEL, HAIM	
STREET ADDRESS 210-71 STREET #309	
CITY-ST-ZIP MIAMI BEACH, FL 33141	
TITLE	- Company
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	· ·
NAME STREET ADDRESS	l
CITY-ST-ZIP	I DO NOT WRITE
	
TITLE	I IN THIS SPACE
NAME	
STREET ADDRESS	Į
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	i
CITY-ST-ZIP	
YITLE	··
NAME	
STREET ADDRESS	
CITY-ST-ZIP	L
12. I hereby certify that the information supplied with this filling does not qualify for the exe	mption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the Information
12. I hereby certify that the information supplied with this filling does not qualify for the exeindicated on this report or supplemental report is true and accurate and that my signary of the corporation or the receiver or tristee empowered to execute this report as required, or on an attachment with an address, with all other life enjogwered.	ture shall have the same legal effect as if made under oath; that I am an officer or director red by Chapter 507, 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.	to by the property of the section of the same the state of the property of the