


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2006 08:00 AM
Secretary of State

DOCUMENT # S60138
 1. Entity Name
290 HARBOR DRIVE CORPORATION



Principal Place of Business 417 E SHERIDAN STREET # 129 DANIA BEACH, FL 33004-4603 US	Mailing Address 417 E SHERIDAN STREET # 129 DANIA BEACH, FL 33004-4603 US
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02212008 No Chg-F CRZE034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0302258	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**DEL VALLE, MILLY
 % SAGE SOLUTIONS, INC.
 417 E SHERIDAN STREET, # 129
 DANIA BEACH, FL 33004-4603**

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 _____ DATE _____
Signature, typed or printed name of registered agent and this is applicable. (NOTE: Registered Agent signature required when reissuing)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DEL VALLE, MILLY 417 E SHERIDAN STREET # 129 DANIA BEACH, FL 330044603
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CALLAN, GERDA 11767 S DIXIE HWY # 115 MIAMI, FL 33156
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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: *Gerda Callan* **GERDA CALLAN** **4/17/06** **(305) 412-1341**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day/Time/Phone #