

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000032693

Entity Name: HAR RETAIL OF BAYSIDE, INC

FILED
Apr 16, 2009
Secretary of State

Current Principal Place of Business:

BAYSIDE MALL
401 BISCAYNE BLVD # N 215
MIAMI, FL 33132 US

New Principal Place of Business:

Current Mailing Address:

10796 PINES BLVD
SUITE 204
PEMBROKE PINES, FL 33026 US

New Mailing Address:

BAYSIDE MALL
401 BISCAYNE BLVD # N 215
MIAMI, FL 33132 US

FEI Number: 20-2457502

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOYAL, PATRICK
10796 PINES BLVD
SUITE 204
PEMBROKE PINES, FL 33026 US

Name and Address of New Registered Agent:

ALTIT, ALAIN
401 BISCAYNE BLVD # N 215
MIAMI, FL 33132 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: ALAIN ALTIT

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ALTIT, ALAIN
Address: 299 COCO PLUM ROAD
City-St-Zip: CORAL GABLES, FL 33143 US

Title: VP (X) Delete
Name: OZIEL, REUVEN
Address: 1401 PINES BLVD SUITE # 358
City-St-Zip: PEMBROKE PINES, FL 33026 US

Title: VP () Delete
Name: OZIEL, HAREL
Address: 1401 PINES BLVD SUITE # 358
City-St-Zip: PEMBROKE PINES, FL 33026 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: OZIEL, HAREL
Address: 401 BISCAYNE BLVD # N 215
City-St-Zip: MIAMI, FL 33132 US

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: ALAIN ALTIT

P

04/16/2009

Electronic Signature of Signing Officer or Director

Date