

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 227699

FILED
Mar 25, 2009
Secretary of State

Entity Name: HARBOR-BY-THE-SEA, INC.

Current Principal Place of Business:

401 COLLINS AVENUE
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

C/O BLUE LEAF MANAGEMENT,
P.O BOX 190239
MIAMI BEACH, FL 33119

New Mailing Address:

FEI Number: 59-2770333 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAILLEUL, DOMINIQUE
BLUE LEAF MANAGEMENT
601 COLLINS AVENUE SUITE A
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SARAPUCHIELLO, JOHN
Address: 401 COLLINS AVE #19
City-St-Zip: MIAMI BEACH, FL 33139

Title: VD () Delete
Name: SHIRLEY, STERN
Address: 401 COLLINS AVE #13
City-St-Zip: MIAMI BEACH, FL 33139

Title: TD () Delete
Name: SKRUODYS, KOSTAS
Address: 401 COLLINS AVE #24
City-St-Zip: MIAMI BEACH, FL 33139

Title: SD () Delete
Name: AMADEO, CAPIELLO
Address: 401 COLLINS AVE #22
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: IRMA, MALONE
Address: 401 COLLINS AVE #02
City-St-Zip: MIAMI BEACH, FL 33139

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change () Addition
Name: JACOBSON, STEVE
Address: 401 COLLINS AVE # 01
City-St-Zip: MIAMI BEACH, FL 33139

Title: VPD (X) Change () Addition
Name: SKRUODYS, KOSTAS
Address: 401 COLLINS AVE #24
City-St-Zip: MIAMI BEACH, FL 33139

Title: SD (X) Change () Addition
Name: STEPHENSON, KEN
Address: 401 COLLINS AVE #26
City-St-Zip: MIAMI BEACH, FL 33139

Title: D (X) Change () Addition
Name: STERN, SHIRLEY
Address: 401 COLLINS AVE #13
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Change (X) Addition
Name: BERMAN, BERNIE
Address: 401 COLLINS AVENUE # 4
City-St-Zip: MIAMI BEACH, FL 33139

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: JOHN SARAPUCHIELLO

PD

03/25/2009

Electronic Signature of Signing Officer or Director

_____ Date