

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Suzanne B. Matheson
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 15 1996 8:00 am
Secretary of State

DOCUMENT # 594791 (6)

1. Corporation Name
HARDING REALTY, INC.

Principal Place of Business

**9509 HARDING AVENUE
SURFSIDE FL 33154**

Meeting Address

**9509 HARDING AVENUE
SURFSIDE FL 33154**



21	2. Principal Place of Business	2a	Meeting Address
22	Subj. Apt. #, etc.	26	Subj. Apt. #, etc.
23	City & State	27	City & State
24	Zip	28	Zip
25	County	29	County
30	9. Name and Address of Current Registered Agent		

**SMITH, JOSE
402 AINSLEY BUILDING
MIAMI FL 33132**

81	Name
82	Street Address (F.O. Box Numbers Not Acceptable)
83	
84	City
85	Zip Code

FL

11. I, the undersigned, hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that I am duly qualified to act as a registered agent for the corporation named herein. I further certify that I am duly qualified to act as a registered agent for the corporation named herein. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

1. NAME	PD BIGELMAN, ANITA	<input type="checkbox"/> DELETED
2. STREET ADDRESS	9509 HARDING AVENUE SURFSIDE FL	
3. CITY, STATE, ZIP	STD WASERSTEIN, MARTA	<input type="checkbox"/> DELETED
4. STREET ADDRESS	9509 HARDING AVENUE SURFSIDE FL	
5. CITY, STATE, ZIP		<input type="checkbox"/> DELETED
6. NAME		
7. STREET ADDRESS		
8. CITY, STATE, ZIP		<input type="checkbox"/> DELETED
9. NAME		
10. STREET ADDRESS		
11. CITY, STATE, ZIP		<input type="checkbox"/> DELETED

13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. STREET ADDRESS	
3. CITY, STATE, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4. NAME	
5. STREET ADDRESS	
6. CITY, STATE, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
7. NAME	
8. STREET ADDRESS	
9. CITY, STATE, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, STATE, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I, the undersigned, hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that I am duly qualified to act as a registered agent for the corporation named herein. I further certify that I am duly qualified to act as a registered agent for the corporation named herein. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607, Florida Statutes.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/96 (305)8659811

CR2E034 (12/95)