2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2009
Secretary of State

DOCUMENT# 712379

Entity Name: HARDING HALL CONDOMINIUM, INC.

Current Principal Place of Business:

8233 HARDING AVE.
MIAMI BEACH, FL 33141 US

New Principal Place of Business:

Current Mailing Address:

C/O PMSC
8299 CORAL WAY
MIAMI, FL 33155

New Mailing Address:

FEI Number: 59-1200336 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KUPERMAN, MARC A
PMSC
8299 CORAL WAY
MIAMI, FL 33155 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

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SAAD, MIRLAN
Address: 8233 HARDING AVE.
City-St-Zip: MIAMI BEACH, FL 33140

Title: TD ( ) Delete
Name: PEREZ, JULIO
Address: 8233 HARDING AVE.
City-St-Zip: MIAMI BEACH, FL 33140

Title: SD ( ) Delete
Name: DEMOLINA, HENRY
Address: 8233 HARDING AVE
City-St-Zip: MIAMI BEACH, FL 33140

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

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: MARQUEZ, NANCY
Address: 8233 HARDING AVE.
City-St-Zip: MIAMI BEACH, FL 33140

Title: SD (X) Change ( ) Addition
Name: LANDROVE, EULALIA
Address: 8233 HARDING AVE
City-St-Zip: MIAMI BEACH, FL 33140

Title: VP ( ) Change (X) Addition
Name: OZUNA, ALTAGRACIA
Address: 8233 HARDING AVE
City-St-Zip: MIAMI BEACH, FL 33140

Title: D ( ) Change (X) Addition
Name: ALVAREZ, JUAN C
Address: 8233 HARDING AVE
City-St-Zip: MIAMI BEACH, FL 33140

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MIRLAN SAAD PD 03/25/2009

Electronic Signature of Signing Officer or Director — Date