

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 14, 2003 8:00 am
Secretary of State

01-17-2003 90069 011 ****61.25

DOCUMENT # 712379

1. Entity Name

HARDING HALL CONDOMINIUM, INC.



Principal Place of Business

Mailing Address

% PROPERTY MANAGEMENT SERVICES
8299 CORAL WAY
MIAMI FL 33155
US

% PROPERTY MANAGEMENT SERVICES
8299 CORAL WAY
MIAMI FL 33155
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1200336**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PROPERTY MANAGEMENT SERVICES CORPORATION
8299 CORAL WAY
MIAMI FL 33155

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME GONZALEZ-CARVAJAL, GABRIEL
STREET ADDRESS 8233 HARDING AVE., APT. 303
CITY-ST-ZIP MIAMI BEACH FL 33140 ☒ Delete

TITLE PD
NAME GANZARDIYA, LEON
STREET ADDRESS 8233 HARDING AVE, APT 708
CITY-ST-ZIP MIAMI BEACH, FL 33140 ☒ Change ☐ Addition

TITLE SD
NAME RODRIGUEZ, MARIA E
STREET ADDRESS 8233 HARDING AVE., APT. 503
CITY-ST-ZIP MIAMI BEACH FL 33140 ☒ Delete

TITLE SD
NAME GONZALEZ-CARVAJAL, GABRIEL
STREET ADDRESS 8233 HARDING AVE, APT 303
CITY-ST-ZIP MIAMI BEACH, FL 33140 ☒ Change ☐ Addition

TITLE D
NAME LINDBERG, ANDREW
STREET ADDRESS 8233 HARDING AVE., APT. 409
CITY-ST-ZIP MIAMI BEACH FL 33140 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE TD
NAME GANZARDIYA, LEON
STREET ADDRESS 8233 HARDING AVE., APT. 708
CITY-ST-ZIP MIAMI BEACH FL 33140 ☒ Delete

TITLE TD
NAME SILVA, JACQUELINE
STREET ADDRESS 8233 HARDING AVE, APT 608
CITY-ST-ZIP MIAMI BEACH, FL 33140 ☒ Change ☐ Addition

TITLE D
NAME TEJERO, MARIA T
STREET ADDRESS 8233 HARDING AVE., APT. 201
CITY-ST-ZIP MIAMI BEACH FL 33140 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VPD
NAME LANDROVE, EULALIA
STREET ADDRESS 8233 HARDING AVE., APT. 504
CITY-ST-ZIP MIAMI BEACH FL 33140 ☒ Delete

TITLE VPD
NAME LINDBERG, ANDREW
STREET ADDRESS 8233 HARDING AVE, APT 409
CITY-ST-ZIP MIAMI BEACH, FL 33140 ☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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:

Leon G. Ganzardiya
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/14/03

305-264-4250
Date Daytime Phone

CR2E037 (10/02)