

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002489

Entity Name: HALL INVESTMENTS LTD. INC.

FILED
Jun 23, 2009
Secretary of State

Current Principal Place of Business:

ONE LINDEN PLACE, SUITE 407
GREAT NECK, NY 11021

New Principal Place of Business:

Current Mailing Address:

ONE LINDEN PLACE, SUITE 407
GREAT NECK, NY 11021

New Mailing Address:

FEI Number: 13-3673439

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYNN, KEVIN
1311 EXECUTIVE CENTER DRIVE
KOGER CENTER
TALLAHASSEE, FL 32301 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CHRM () Delete
Name: HAKIMI, LYDA
Address: 24 RIDGE DRIVE WEST
City-St-Zip: GREAT NECK, NY 11021

Title: P () Delete
Name: HAKIMI, LYDA
Address: 24 RIDGE DRIVE WEST
City-St-Zip: GREAT NECK, NY 11021

Title: V () Delete
Name: HAKIMI, TODD
Address: 24 RIDGE DRIVE WEST
City-St-Zip: GREAT NECK, NY 11021

Title: ST () Delete
Name: LOWELL, JEROME
Address: 184 LEXINGTON AVENUE
City-St-Zip: NEW YORK, NY 10016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: JEROME LOWELL

TREA

06/23/2009

Electronic Signature of Signing Officer or Director

Date