

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F95000003813

FILED
Mar 31, 2005
Secretary of State

Entity Name: DR. HARSANY REALTIES INC.

Current Principal Place of Business:

3300 DEFALAISE #603
MONTREAL, QUEBEC
CANADA H3R 2E5,

New Principal Place of Business:

803 NE 19TH AVENUE
FORT LAUDERDALE, FL 33304 US

Current Mailing Address:

3300 DEFALAISE #603
MONTREAL, QUEBEC
CANADA H3R 2E5,

New Mailing Address:

4612 DRAPER AVENUE
MONTREAL, QU H4A2P4 CA

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HARSANI, PETER DSC
803 NE 19TH AVE
FORT LAUDERDALE, FL 33304 US

Name and Address of New Registered Agent:

MCLAUGHLIN, ROBERT C ESQ.
2601 EAST OAKLAND PARK BLVD
SUITE 605
FORT LAUDERDALE, FL 33306 US

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: ROBERT C MCLAUGHLIN JR. ESQ.

03/31/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSC () Delete
Name: HARSANY, PETER D.SC.
Address: 803 NE 19TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: VVC () Delete
Name: HARSANY, ADRIENNE MRS
Address: 803 NE 19TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: DV () Delete
Name: HARSANY, MARY
Address: 4612 DRAPER AVE, MONTREAL
City-St-Zip: QUEBEC, CA H4A 2

Title: VD (X) Delete
Name: ROMANOWSKI (HARSANY), AGNES MRS
Address: 290 DIXON RD #603, TORONTO, ONTARIO
City-St-Zip: CANADA M9R 1R9,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HARSANY, MARY
Address: 4612 DRAPER AVENUE
City-St-Zip: MONTREAL, QU H4A 2P4 CA

Title: VD (X) Change () Addition
Name: HARSANY, ADRIENNE
Address: 803 NE 19TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: VD (X) Change () Addition
Name: ROMANOWSKI, AGNES
Address: 223-2075 SHEROBEE ROAD
City-St-Zip: MISSISSAUGA, ON L5A 4C1 CA

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROBERT C MCLAUGHLIN JR., ESQ

RA

03/31/2005

Electronic Signature of Signing Officer or Director

Date