

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000011558

Entity Name: CORAL HARDING, LLC

FILED
May 13, 2004
Secretary of State

Current Principal Place of Business:

8515 EGRET MEADOW LANE
WEST PALM BEACH, FL 33412

New Principal Place of Business:

8143 HARDING AVE
MIAMI BEACH, FL 33141

Current Mailing Address:

8515 EGRET MEADOW LANE
WEST PALM BEACH, FL 33412

New Mailing Address:

8143 HARING AVE
MIAMI BEACH, FL 33141

FEI Number: 47-0895741

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIFKIN, FRANCES
8515 EGRET MEADOW LANE
WEST PALM BEACH, FL 33412

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

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: CURA, PETER
Address: 8143 HARDING AVE
City-St-Zip: MIAMI BEACH, FL 33141

Title: MGRM () Delete
Name: RIFKIN, FRANCES
Address: 8515 EGRET MEADOW LANE
City-St-Zip: WEST PALM BEACH, FL 33412

Title: MGRM () Delete
Name: RIFKIN, BRYNA PAULINE
Address: 8515 EGRET MEADOW LANE
City-St-Zip: WEST PALM BEACH, FL 33412

ADDITIONS/CHANGES:

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 for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: PETER CURA

MGR

05/13/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date