


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Feb 21, 2005 8:00 am
Secretary of State

02-21-2005 90177 007 ****50.00

DOCUMENT # L03000054293	
1. Entity Name HARDER HOLDINGS, LLC	

Principal Place of Business 9601 COLLINS AVENUE, APT. 502 MIAMI FL 33154-2211	Mailing Address 9601 COLLINS AVENUE, APT. 502 MIAMI FL 33154-2211
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address c/o Paul Stokes Suite 1750 One SE 3rd Ave. Miami FL
City & State	City & State 33131
Zip	Country USA



1st MOORE CR2E083 (10/04)

4. FEI Number 20-0783470	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent ANTUNEZ, JUAN C ESQ STOKES MCMILLAN & MARACINI P.A. 2 S. BISCAYNE BLVD., STE. 3750 MIAMI FL 33131	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) One Southeast Third Avenue #1750 City Miami FL Zip Code 33131	

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2005

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HARDER, LOIS C 9601 COLLINS AVE., APT. 502 MIAMI BEACH FL 33154 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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11. 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 is true and accurate and that my 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: *Lois C Harder* **12/10/05**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #