

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000044627

FILED
Mar 02, 2009
Secretary of State

Entity Name: CLARIDGE H, LLC

Current Principal Place of Business:

C/O BALES & BALES, P.A. 4000 PONCE DE LEON
BLVD., SUITE 470
CORAL GABLES, FL 33146

New Principal Place of Business:

1100 CONEY ISLAND AV.
3-RD FLOOR
BROOKLYN, NY 11230 US

Current Mailing Address:

C/O HORIZON GRP., 1100 CONEY ISLAND AVE.
SUITE 300
BROOKLYN, NY 11230

New Mailing Address:

1100 CONEY ISLAND AV.
3-RD FLOOR
BROOKLYN, NY 11230 US

FEI Number: 20-4539050

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BALES & BALES, P.A.
4000 PONCE DE LEON BLVD.
SUITE 470
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

ROY R.LUSTIG,P.A.
1SOUTH THIRD AV.
1210 SUNTRUST INTERNATIONALE CENTER
MIAMI, FL 33131 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: ROY R.LUSTIG

03/02/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HORIZON FUNDING GROU, P, INC.
Address: 1100 CONEY ISLAND AVENUE
City-St-Zip: BROOKLYN, NY 11230

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BORIS, MOTOVICH
Address: 1100 CONEY ISLAND AVENUE
City-St-Zip: BROOKLYN, NY 11230

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 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: BORIS MOTOVICH

MM

03/02/2009

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