

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L24165

FILED  
Jan 07, 2008  
Secretary of State

Entity Name: HADAIR ASSOCIATES INCORPORATED

**Current Principal Place of Business:**

C/O RIBET, DAVID, S  
6 EAST 45TH ST  
NEW YORK, NY 10017 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O RIBET, DAVID, S  
6 EAST 45TH ST  
NEW YORK, NY 10017 US

**New Mailing Address:**

FEI Number: 65-0150342

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SCHATZ, IRVING  
17232 BRIDLE TRAIL  
BOCA RATON, FL 33496 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: SECT ( ) Delete  
Name: SCHATZ, IRVING,  
Address: 17232 BRIDLE TR  
City-St-Zip: BOCA RATON, FL

Title: PRES ( ) Delete  
Name: RIBET, DAVID,  
Address: 6 E 45TH ST  
City-St-Zip: NEW YORK, NY 10017

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: DAVID RIBET

PRES

01/07/2008

Electronic Signature of Signing Officer or Director

Date