


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 07, 2004 8:00 am
Secretary of State

07-07-2004 90004 036 ***150.00

DOCUMENT # M61315

1. Entity Name
THE HARRISON ARCADE CORPORATION



Principal Place of Business: **1909 HARRISON STREET HOLLYWOOD, FL 33020**

Mailing Address: **1909 HARRISON STREET HOLLYWOOD, FL 33020**

54060205



07012004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number: **65-0010632** Applied For: Not Applicable:

5. Certificate of Status Desired: **\$8.75** Additional Fee Required.

6. Name and Address of Current Registered Agent:

FRIEDMAN, MICHAEL DEAN
801 BRICKELL AVENUE
SUITE 1401
MIAMI, FL 33131

DO NOT WRITE IN THIS SPACE

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 \$550.00
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution: **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MOSHER, MICHAEL M.
STREET ADDRESS	1909 HARRISON STREET
CITY-ST-ZIP	HOLLYWOOD, FL
TITLE	D
NAME	MOSHER, PHYLLIS MARLENE
STREET ADDRESS	1909 HARRISON STREET
CITY-ST-ZIP	HOLLYWOOD, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. 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 or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Phyllis M. Mosher Date: 7/1/04 Daytime Phone #: 954 9205030

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment

54060205
M61315

HARRISON ARCADE CORPORATION

1909 Harrison Street, Hollywood, Florida 33020

Phone (954)920-5030 Fax (954)920-3302

July 1, 2004

Florida Department of State

Division of Corporations

P.O. Box 6198

Tallahassee, FL 32314

RE: M61315

To Whom It May Concern;

We received a "Notice of Intent to Dissolve" in today's mail. We do not intent to dissolve the above mentioned corporation. We never received the renewal letter/form for our Annual Report.

Please accept the enclosed check for immediate payment.

Thank you.

Sincerely,



Stacey Mosher, For and on behalf of Harrison Arcade Corporation

Cc: Enclosures: check # 9673
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