2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED May 17, 2005 08:00 AM Secretary of State

Daylima Phone #

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1. Entity Nam	MENT # N93000000 D AND MICA HADAR FOUND			Se	cretary	of Stat	
Principal Plac 136 E 57TH NEW YORK, M	ST (1212)	Mailing Address 200 E. 69TH STREET, #47-A NEW YORK, NY 10021		· 	·		
	:=						
DO NOT WRITE		IN THIS SPA	CE	4. FEI Number 13-37213		CR2E037 (10	Applied For Not Applicable
		7 m - 1 mm	1.4	5. Certificate of	Status Desired		5 Additional equired
1200 S PIN	6. Name and Address of Current Re PORATION SYSTEM NE ISLAND RD ION, FL 33324	agistered Agent	DO NOT WRITE IN THIS SPACE				
	named entity submits this statement for t	he purpose of changing its register	l ed office or register	red agent, or both,	in the State of Flo	rida. I am familia:	with, and accept
_	tions of registered agent.						
SIGNATURE	Signature, typed or printed name of registered agent and	d file if applicable. (NOTE Registers	d Agent signature required	d when reinstating)		DATE	
Filing Fee is \$61.25 Due by September 7, 2005 9. Election Campaign Finance Trust Fund Contribution.				.00 May Be led to Fees			·
10.	OFFICERS AND D	RECTORS					ر د درسیسه کند استوان در
NAME STREET ADDRESS CITY-ST-ZIP	HADAR, RICHARD A 200 E. 69TH STREET, #47-A NEW YORK, NY 10021					0367391 5-80001-00	11 61.25
TITLE HAME STREET ADDRESS CITY-ST-ZIP	D FEMINELLA, ANN 610 EVERDELL AVENUE WEST ISLIP, NY 11795					Address of the second s	 71,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HADAR, MICA B 200 E 69TH ST (47A) NEW YORK, NY 10021			DO I	NOT W	RITE	an Townson
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	'HIS SF	PACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<u></u>			<u>, e </u>	
TITLE NAME STREET ADDRESS							- 17

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 617, 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.

RICHARD HAYAN

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR