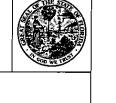
2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N9300000961

THE HADAR FOUNDATION, INC.



FILED Jan 13, 2003 8:00 am Secretary of State 01-13-2003 90092 041 ****61.25



Principal Plai	ce of Business	Mailing Address						
136 E 57TH ST (1212) 200		200 E. 69TH STREET. #47-6 NEW YORK NY 10021	4					
2. Principal Place of Business 3. M		3. Mailing Address	. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State	City & State		4. FEI Number 13-3721350		Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Sta		8.75 Add	ditional	
	6. Name and Address of Current I	Registered Agent		7. Name and Addr	ess of New Registered Ag	ent]
						 -		-
1200 S P	IPORATION SYSTEM PINE ISLAND RD TON FL 33324		Street Address ((P.O. Box Number is Not Acceptable)			
			City	100	FL	Zip Cod	e	-
SIGNATURE	Signature, typed or printed name of registered agent a	9. Election Cam Trust Fund Co		\$5.00 May Be Added to Fees	Make Check i			
b								
10.	OFFICERS AND DIR	ECTORS	11,	ADDITIONS/CHANGES	S TO OFFICERS AND DIRE	CTORS IN	10]_
TITLE ' NAME ' STREET ADDRESS CITY-ST-ZIP	D HADAR, RICHARD A 200 E. 69TH STREET, #47-A NEW YORK NY 10021	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Change	☐ Addition	E037 (10/02)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HADAR, JOSHUA A 315 E 69TH ST APT 2M NEW YORK NY 10021	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP] Change	☐ Addition	GBO
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Hadar, Mica 200 e 69th St (47A) New York Ny 10021	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP] Change	☐ Addition	
TITLE NAME STREET ADORESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		C] Change	☐ Addition	
TITLE NAME Street address City-St-Zip		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		С] Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		., [] Change	Addition	

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 of 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.

SIGNATURE:

Brichard A Hadar 01/06/03 THE YIII x 16