

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000052529

Entity Name: 910 HOTEL GRANDE, INC.

FILED
Jan 23, 2007
Secretary of State

Current Principal Place of Business:

1140 KANE CONCOURSE
5TH FLOOR
BAY HARBOR ISLANDS, FL 33154

New Principal Place of Business:

18101 COLLINS AVE
910
SUNNY ISLES, FL 33160

Current Mailing Address:

1140 KANE CONCOURSE
5TH FLOOR
BAY HARBOR ISLANDS, FL 33154

New Mailing Address:

FEI Number: 68-0506668 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLDFARB, IGHAL
1140 KANE CONCOURSE
5TH FLOOR
BAY HARBOR ISLANDS, FL 33154 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: DPT () Delete
Name: GOLDFARB, IGHAL
Address: 1140 KANE CONCOURSE, 5TH FLOOR
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

Title: DV () Delete
Name: GOLDFARB, DIEGO ELIEL
Address: 1140 KANE CONCOURSE, 5TH FLOOR
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

Title: DV () Delete
Name: GOLDFARB, DANIEL
Address: 1140 KANE CONCOURSE, 5TH FLOOR
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: IGHAL GOLDFARB

DPT

01/23/2007

Electronic Signature of Signing Officer or Director

Date