

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 07, 2008 08:00 AM
Secretary of State

DOCUMENT # P04000144870

1. Entity Name
MAOR HAYIM PUBLISHING, INC.



Principal Place of Business
**6200 SW 41 ST.
DAVIE, FL 33314**

Mailing Address
**6200 SW 41 ST.
DAVIE, FL 33314**



04042008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1884154

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**HAYYIM, DANIEL A
6201 SW 41 ST
DAVIE, FL 33314**

**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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

000000881828
04/16/08-80016-010 150.00

10. OFFICERS AND DIRECTORS

TITLE	VP
NAME	HAYYIM, DANIEL
STREET ADDRESS	2981 SW 156TH AVE.
CITY-ST-ZIP	DAVIE, FL 33331
TITLE	VD
NAME	RODRIGUEZ, MELCHOR
STREET ADDRESS	2981 SW 156TH AVE.
CITY-ST-ZIP	DAVIE, FL 33331
TITLE	SD
NAME	HAYYIM, ADIS
STREET ADDRESS	2981 SW 156 AVE
CITY-ST-ZIP	DAVIE, FL 33331
TITLE	VPD
NAME	HERNANDEZ, VASTY J
STREET ADDRESS	2981 SW 156 AVE
CITY-ST-ZIP	DAVIE, FL 33331
TITLE	PDT
NAME	ADAN, TOPETE CUriEL
STREET ADDRESS	6200 SW 41 ST.
CITY-ST-ZIP	DAVIE, FL 33314
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 04/08

Date

9546732304

Daytime Phone #