

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90867 004 ***150.00

DOCUMENT # P05000014643

1. Entity Name
HARP HOTELS, INC.



Principal Place of Business
**6141 VIA VENETIA N
DELRAY BEACH, FL 33484-6437 US**

Mailing Address
**6141 VIA VENETIA N
DELRAY BEACH, FL 33484-6437 US**

60046210

2. Principal Place of Business - No P.O. Box #
9481 Grand Estates Way

Suite, Apt. #, etc.

3. Mailing Address
9481 Grand Estates Way

Suite, Apt. #, etc.

City & State
Boca Raton, FL

City & State
Boca Raton, FL

Zip
33496

Country
USA

Zip
33496

Country
USA

04262007 Chg-P CR2E034 (12/06)

4. FEI Number
20-2478504

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**HARRIS, BERT J III
401 DAL HALL BOULEVARD
LAKE PLACID, FL 33852**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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's signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **PATEL, RAMUBHAI N**
STREET ADDRESS **6141 VIA VENETIA N**
CITY-ST-ZIP **DELRAY BEACH, FL 334846437**

TITLE **STD** ☐ Delete
NAME **PATEL, CHANDANBEN R**
STREET ADDRESS **2165 U.S. HIGHWAY 27 SOUTH**
CITY-ST-ZIP **LAKE PLACID, FL 33852**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☒ Change ☐ Addition
NAME **Patel, Ramubhai N.**
STREET ADDRESS **9481 Grand Estates Way**
CITY-ST-ZIP **Boca Raton, FL 33496**

TITLE **STD** ☒ Change ☐ Addition
NAME **Patel, Chandanben R.**
STREET ADDRESS **9481 Grand Estates Way**
CITY-ST-ZIP **Boca Raton, FL 33496**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

4/29/07

Date

Daytime Phone #