

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000029651

FILED
Apr 09, 2007
Secretary of State

Entity Name: HIGHLANDS MANAGEMENT CORP.

Current Principal Place of Business:

1428 BRICKELL AVE SUITE 105
MIAMI, FL 33131

New Principal Place of Business:

4400 BISCAYNE BLVD., SUITE 950
MIAMI, FL 33137

Current Mailing Address:

1428 BRICKELL AVE SUITE 105
MIAMI, FL 33131

New Mailing Address:

4400 BISCAYNE BLVD., SUITE 950
MIAMI, FL 33137

FEI Number: 20-2424610

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

M & W AGENTS INC
2101 CORPORATE BLVD SUITE 107
BOCA RATON, FL 334317343 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: P () Delete
Name: HALPRYN, GLENN L
Address: 1428 BRICKELL AE STE 105
City-St-Zip: MIAMI, FL 33131

Title: ST () Delete
Name: CABRERA, MARLENE
Address: 1428 BRICKELL AVE STE 105
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HALPRYN, GLENN L
Address: 4400 BISCAYNE BLVD., SUITE 950
City-St-Zip: MIAMI, FL 33137 US

Title: ST (X) Change () Addition
Name: CABRERA, MARLENE
Address: 4400 BISCAYNE BLVD., SUITE 950
City-St-Zip: MIAMI, FL 33137 US

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: GLENN L. HALPRYN

P

04/09/2007

Electronic Signature of Signing Officer or Director

_____ Date