

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000092304

**FILED**  
**Mar 15, 2012**  
**Secretary of State**

**Entity Name:** HARVEST LIMITED INC.

**Current Principal Place of Business:**

15 PELICAN ISLE  
FORT LAUDERDALE, FL 33301

**New Principal Place of Business:**

15 PELICAN ISLE  
FORT LAUDERDALE, FL 33301 US

**Current Mailing Address:**

15 PELICAN ISLE  
FORT LAUDERDALE, FL 33301

**New Mailing Address:**

15 PELICAN ISLE  
FORT LAUDERDALE, FL 33301 US

**FEI Number:** 26-3418602

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NAGER, MARCEL  
15 PELICAN ISLE  
FORT LAUDERDALE, FL 33301 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: NAGER, BRUCE A  
Address: 15 PELICAN ISLE  
City-St-Zip: FORT LAUDERDALE, FL 33301 US

Title: STD  
Name: NAGER, MARCEL  
Address: 15 PELICAN ISLE  
City-St-Zip: FORT LAUDERDALE, FL 33301 US

I hereby 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 all other like empowered.

SIGNATURE: BRUCE NAGER

P

03/15/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date