2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000021491

Entity Name: HARDING POINT APARTMENTS, INC.

FILED Apr 08, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Julicut i illicipui i luce di Busiliess.	New i interput i luce of Business.

18984 W DIXIE HWY 7334 HARDING AVE.

N. MIAMI BEACH, FL 33180 US MIAMI BEACH, FL 33139 US

Current Mailing Address: New Mailing Address:

18984 W DIXIE HWY 20941 N.E 21

N. MIAMI BEACH, FL 33179 N. MIAMI BEACH, FL 33180 US US

FEI Number: 65-0398011 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ATTAS, SHLOMO ATTAS, SHLOMO 18984W DIXIE HWY 20941 N.E 21 COURT N. MIAMI BEACH, FL 33180 US N. MIAMI BEACH, FL 33179 US

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: 04/08/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDS () Delete Title: PDS (X) Change () Addition

ATTAS, SHLOMO Name: Name: ATTAS, SHLOMO 18984 W. DIXIE HWY 20941 N.E 21 CT. Address: Address: City-St-Zip: N. MIAMI, FL 33180 City-St-Zip: N. MIAMI, FL 33179

Title: VΡ Title: VΡ () Delete (X) Change () Addition

OZ, ACHIAZ Name: Name: OZ. ACHIAZ

18984 W DIXIE HWY 20941 N.E 21 CT Address: Address: NORTH MIAMI BEACH, FL 33180 NORTH MIAMI BEACH, FL 33179

City-St-Zip: City-St-Zip:

Title: Title: () Delete ST (X) Change () Addition ATTAS, LILY Name: ATTAS, LILY Name:

18984 W. DIXIE HWY 20941 N.E 21 CT Address Address:

City-St-Zip: NORTH MIAMI BEACH, FL 33180 City-St-Zip: NORTH MIAMI BEACH, FL 33179

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SHLOMO ATTAS DP 04/08/2005