

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2004 8:00 am
Secretary of State

03-10-2004 90023 010 ***150.00

DOCUMENT # P95000052409

1. Entity Name
HARBINGER, INC.



Principal Place of Business
**6421 CONGRESS AVENUE
SUITE 200
BOCA RATON, FL 33487 US**

Mailing Address
**6421 CONGRESS AVENUE
SUITE 200
BOCA RATON, FL 33487 US**

44016691

2. Principal Place of Business

17914 Foxborough Lane

Suite, Apt. #, etc.

3. Mailing Address

17914 Foxborough Lane

Suite, Apt. #, etc.

City & State
Boca Raton, FL

Zip
33496

Country
US

City & State
Boca Raton, FL

Zip
33496

Country
US

03032004

Chg-P

CR2E034 (10/03)

4. FEI Number

65-0605177

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**RIDOLFO, JR., PHILLIP T ESQ.
777 S. FLAGLER DRIVE
SUITE 300E
WEST PALM BEACH, FL 33401**

7. Name and Address of New Registered Agent

Name **Andrew Dunstan**

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 signature required when reappointing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00.**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE **VP** ☐ Delete
NAME **BREGMAN, KIM N**
STREET ADDRESS **6421 CONGRESS AVENUE, SUITE 200**
CITY-ST-ZIP **BOCA RATON, FL 33487**

TITLE **P** ☐ Delete
NAME **DIAMOND, NANCY L**
STREET ADDRESS **6421 CONGRESS AVENUE, SUITE 200**
CITY-ST-ZIP **BOCA RATON, FL 33487**

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 ☐ Change ☒ Addition
NAME
STREET ADDRESS **17914 Foxborough Lane**
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
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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 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 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

3/5/04

Date

561-477-0676

Daytime Phone #