


# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 14, 2003 8:00 am**  
**Secretary of State**

04-14-2003 90219 022 \*\*\*150.00

0303629 AV

<b>DOCUMENT #</b> P96000026732	
<b>1. Entity Name</b> HARGATE HOLDINGS, INC.	

<b>Principal Place of Business</b> 2875 NE 191ST STREET STE 404 NO MIAMI BEACH FL 33180	<b>Mailing Address</b> 2875 NE 191ST STREET STE 404 NO MIAMI BEACH FL 33180
---	---



<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

☐ CHECK HERE IF MAKING CHANGES

<b>4. FEI Number</b> 65-0664746		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> \$8.75 Additional Fee Required			
<b>6. Name and Address of Current Registered Agent</b>		<b>7. Name and Address of New Registered Agent</b>	
REINHARD, SANFORD N 2875 NE 191ST STREET STE 404 NO MIAMI BEACH FL 33180		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** \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) **DATE** \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GOLDLIST, HARRY 1 CLARK AVENUE WEST, UNIT 104 THORNHILL, ONTARIO L4J 7Y7 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GOLDLIST HARRY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1 CLARK AVENUE WEST UNIT 1104 THORNHILL ONT L4J 7Y6
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GOLDLIST, BARRY GORDON 318 BROOKE AVENUE TORONTO, ONTARIO M5M 2L3 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GOLDLIST BARRY GORDON <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 138 GREY RD TORONTO ONT M5M 4G1
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RAPP, PAULINE 24 MCMORRAN CRESCENT THORNHILL, ONTARIO L4J 2T5 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

**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:** PAULINE RAPP 6. GOLDLIST 2/19/03 4166362664  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)

attachment 70038778  
# PGU0000026732

SANFORD N. REINHARD, P. A.

ATTORNEY AT LAW

2875 N. E. 191ST STREET

SUITE 404

AVENTURA, FLORIDA 33180

MIAMI

(305) 932-7555

TELECOPIER

(305) 935-5671

April 10, 2003

Secretary of State  
Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, Florida 32302-1500

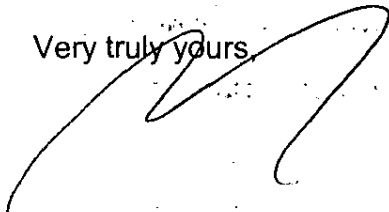
**Re: 2003 Corporate Business Report**

Gentlemen:

We are enclosing the 2003 Annual Corporation Report for Hargate Holdings, Inc. together with a check in the amount of \$150.00 for the filing of the report.

Thank you.

Very truly yours,



Sanford N. Reinhard  
SNR/hs