


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2006 08:00 AM
Secretary of State

DOCUMENT # P97000100733

1. Entity Name
JARDACK REAL ESTATE CORPORATION



Principal Place of Business 11402 NW 41 ST 201 MIAMI, FL 33178	Mailing Address 11402 NW 41 ST 201 MIAMI, FL 33178
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03172006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0812307	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**HABER, ROBERT M
 520 BRICKELL KEY DRIVE
 SUITE O-305
 MIAMI, FL 33131**

DO NOT WRITE IN THIS SPACE

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

00000478158
 04/07/06-80020-016 158.75

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS HABER, ROBERT M 520 BRICKELL KEY DRIVE O-305 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JARDACK, HANI 11402 N.W. 41 ST #201 MIAMI, FL 33178
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS HABER, ROBERT M 520 BRICKELL AVE, SUITE D-305 MIAMI, FL 33131
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Robert M. Haber* 3/18/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #