

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000022202

Entity Name: HADAR CORPORATION

FILED
Feb 07, 2009
Secretary of State

Current Principal Place of Business:

17221 NE 11TH AVE
N MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

17221 NE 11TH AVE
N MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: 65-0902013

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIAMA, ISHAK
17221 NE 11TH AVE
N MIAMI BEACH, FL 33162 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SIAMA, ISHAK
Address: 17221 NE 11TH AVE
City-St-Zip: N MIAMI BEACH, FL 33162

Title: VP () Delete
Name: SIAMA, RACHEL
Address: 17221 NE 11TH AVE
City-St-Zip: N MIAMI BEACH, FL 33162

Title: S () Delete
Name: SIAMA, HAIM
Address: 2440 NE 200 ST
City-St-Zip: N MIAMI BEACH, FL 33179

Title: T () Delete
Name: SELA, AVIVA
Address: 3835 SW 53 CT
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: D () Delete
Name: SIAMA, DROR
Address: 3500 NE 191ST APT 1507
City-St-Zip: MIAMI, FL 33180

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ISHAK SIAMA

P

02/07/2009

Electronic Signature of Signing Officer or Director

Date