2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 23, 2008 8:00 am Secretary of State

DOCUMENT # P99000072821 1. Enlity Name GREENIE HANGARS, INC.						04-23-2008	90040 00	01 ***15	50.00		
Principal Place of Business Mailing Address											
2255 GLADE BOCA RATON	S RD STE 321A I, FL 33431	2255 GLADES RD STE 321A BOCA RATON, FL 33431				riia friii adiki raiki adik					
2. Principal P	lace of Business - No P.O Box #	3. Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04172008	Chg-P	CR2E034	(12/06)				
City & State		City & State		4. FEI Number 65-10139	996		No	plied For t Applicable			
Zíp	Country	Zip	Coun	itry	5. Certificate of	Status Desired		8.75 Add e Required			
	6. Name and Address of Current	Registered Agent	!		7. Name and A	ddress of New R	egistered Ag	ent			
BRESLOW	/ RICHARD H			Name							
BRESLOW, RICHARD H 2255 GLADES RD STE 321A BOCA RATON, FL 33431				Street Address (P.O. Box Number is Not Acceptable)							
								- a .			
				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 reinstating) DATE											
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.	9. Election Campai Trust Fund Cont		ncing \$5.	.00 May Be ed to Fees						
10.	OFFICERS AND		11.		ADDITIONS/C	HANGES TO OFF					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOC GREENBERG, MARTIN F 2255 GLADES RD, SUITE 321 BOCA RATON, FL 33431	☐ Delete					[□ Change	☐ Addition		
FITLE NAME STREET ADDRESS CITY-ST-ZIP	NA SI				Change Addition						
TITLE NAME STREET ADDRESS CITY-ST-ZIP)	□ Change	☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete					[Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete					[Change	Addition .		
NAME STREET ADDRESS CITY-ST-ZIP		□ Delete		1			[Change	☐ Addition		
12. I hereby	certify that the information supplied with on this report or supplemental report i	n this filing does not qualify fo s true and accurate and that n	r the exe ny signa	emptions contained ture shall have the	l in Chapter 119, I same legal effect	Florida Statutes. I as if made under o	further certify path; that I am	that the in	nformation or director		

 of the corporation or the receiver or tr 			by Chapter 607, Florida Stal	lutes; and that my name a	appears in Block 10 or Block 11
changed, or on an attachment with a	n address, with all other like empo	wered.		•	
SIGNATURE:	m	MARTIN	F. GREENJERG CE	0 4-17-08	561-347-8585
SIGNATURE AN	ND TYPED OR PRINTED NAME OF SIGNING C	FFICER OR DIRECTOR		Date	Daytime Phone #