

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S47113

Entity Name: UNIT 1507, INC.

FILED  
Jan 10, 2004  
Secretary of State

**Current Principal Place of Business:**

10155 COLLINS AVE.  
#1507  
BAL HARBOUR, FL 331541627

**New Principal Place of Business:**

**Current Mailing Address:**

10155 COLLINS AVE.  
#1507  
BAL HARBOUR, FL 331541627

**New Mailing Address:**

FEI Number: 65-0363592      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FELDMAN, DAVID, ESQ.  
407 LINCOLN RD  
PH NE  
MIAMI BEACH, FL 33139 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: PD ( ) Delete  
Name: HARA, HENRI,  
Address: 10155 COLLINS AVE. #1507  
City-St-Zip: BAL HARBOUR, FL

Title: VST ( ) Delete  
Name: HARA, RACHEL L.,  
Address: 10155 COLLINS AVE. #1507  
City-St-Zip: BAL HARBOUR, FL

Title: D ( ) Delete  
Name: HARA, RACHEL L.,  
Address: 10155 COLLINS AVE. #1507  
City-St-Zip: BAL HARBOUR, FL

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: HARA, HENRI

PD

01/10/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date