

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90096 039 ***150.00

DOCUMENT # V49643

1. Entity Name
HASNER REALTY CORPORATION



Principal Place of Business
**150 N SWINTON AVE
#100
DELRAY BEACH, FL 33444**

Mailing Address
**150 N SWINTON AVE
#100
DELRAY BEACH, FL 33444**

40076536



03262007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0356457

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**HASNER, LLOYD
150 N SWINTON AVE
#100
DELRAY BEACH, FL 33444**

**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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Lloyd Hasner 3-27-07

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD HASNER, LLOYD 150 N SWINTON AVE #100 DELRAY BEACH, FL 33444
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STV HASNER, LLOYD 150 N SWINTON AVE #100 DELRAY BEACH, FL 33444
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Lloyd Hasner 3-27-07

Date

561-272-1207

Daytime Phone #