

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002528

FILED
May 18, 2007
Secretary of State

Entity Name: HALBERSTEIN FAMILY SUPPORTING FOUNDATION, INC.

Current Principal Place of Business:

4200 BISCAYNE BLVD.
MIAMI, FL 33137

New Principal Place of Business:

Current Mailing Address:

4200 BISCAYNE BLVD.
MIAMI, FL 33137

New Mailing Address:

FEI Number: 91-2117364 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SCHWARTZ, STEPHEN M
4200 BISCAYNE BLVD.
MIAMI, FL 33137 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

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: EISENBERG, HERBERT
Address: 4200 BISCAYNE BLVD
City-St-Zip: MIAMI, FL 33137

Title: DT () Delete
Name: SOLOMON, JACOB
Address: 4200 BISCAYNE BLVD.
City-St-Zip: MIAMI, FL 33137

Title: D () Delete
Name: BELLOCK, JACK
Address: 19707 TURNBERRY WAY APT. 8-J
City-St-Zip: AVENTURA, FL 33180

Title: D () Delete
Name: SILVERMAN, BARRY J DR.
Address: 2801 N.E. 208TH TERRACE, SUITE 102
City-St-Zip: AVENTURA, FL 33180

Title: D () Delete
Name: OLEMBERG, ISAAC
Address: 800 N.W. 21ST STREET
City-St-Zip: MIAMI, FL 33137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: LANDE, STEPHEN C
Address: 4200 BISCAYNE BLVD
City-St-Zip: MIAMI, FL 33137

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

Title: () Change () Addition
Name:
Address:
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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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEPHEN C. LANDE

S

05/18/2007

Electronic Signature of Signing Officer or Director

_____ Date