

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2007 08:00 AM
Secretary of State

DOCUMENT # P98000108152



1. Entity Name
HIDDEN HARBOR CORP.
HIDDEN BLVD., STE. 710
REGO PARK, NY 11374

Mailing Address
C/O SAMSON MANAGEMENT CORP.
97-77 QUEENS BLVD., STE. 710
REGO PARK, NY 11374



01092007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 11-3468332	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

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	P
NAME	GOLDSTEIN, ARNOLD
STREET ADDRESS	9777 QUEENS BLVD., STE. 710
CITY-ST-ZIP	NEGO PARK, NY
TITLE	V
NAME	BIANCO, JOHN
STREET ADDRESS	9777 QUEENS BLVD., STE. 710
CITY-ST-ZIP	NEGO PARK, NY 710
TITLE	S
NAME	WAXMAN, MARK Z
STREET ADDRESS	235 S. COUNTY RD., STE. 210
CITY-ST-ZIP	PALM BEACH, FL 33480
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 01/24/07-80048-020 150.00

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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 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 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 changed, or on an attachment with an address, with all other persons empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Arnold Goldstein 1/10/07
 ARNOLD GOLDSTEIN 1/10/07
 Date