

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701094

FILED
Jul 02, 2004
Secretary of State**Entity Name:** MESIFTA OF GREATER MIAMI-LOUIS MERWITZER HIGH SCHOOL, INC.**Current Principal Place of Business:**1965 ALTON RD
MIAMI BCH, FL 33139**New Principal Place of Business:****Current Mailing Address:**1965 ALTON RD
MIAMI BCH, FL 33139**New Mailing Address:****FEI Number:** 59-6045452 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ZEMEL, NATHANIEL M
1965 ALTON RD
MIAMI BEACH, FL 33139 US**Name and Address of New Registered Agent:**BLATT, ARON
2300 ALTON
MIAMI BEACH, FL 33140 US

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: ARON BLATT

07/02/2004

Electronic Signature of Registered Agent_____
Date**OFFICERS AND DIRECTORS:****Title:** VD () Delete
Name: FEIT, MELVIN,
Address: 1604 BAY RD
City-St-Zip: MIAMI BCH, FL 33139**Title:** STD () Delete
Name: SIMON, RABBI MILTON
Address: 2850 PRAIRIE AVE
City-St-Zip: MIAMI BCH, FL 33140**Title:** PD () Delete
Name: GALBET, ABRAHAM A
Address: 999 WASHINGTON AVE
City-St-Zip: MIAMI BEACH, FL**Title:** D () Delete
Name: SCHULGASSER, ELCHANAN
Address: 1975 AHON RD. APT 3`
City-St-Zip: MIAMI BEACH, FL 33139**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** PD (X) Change () Addition
Name: GALBUT, ABRAHAM A
Address: 999 WASHINGTON AVE
City-St-Zip: MIAMI BEACH, FL**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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELCHANAN SCHULGASSER

D

07/02/2004

Electronic Signature of Signing Officer or Director_____
Date