

FILE NOW: FILING FEE AFTER MAY-1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 31 AM 10:20

DOCUMENT # 702652 (9)

1. Corporation Name
JEWISH VOCATIONAL SERVICE, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
735 NE 125TH STREET 735 N.E. 125TH STREET
NO MIAMI FL 33161 NORTH MIAMI FL 33161
US US

3. Date Incorporated or Qualified 07/03/1961	3a. Date of Last Report 04/11/1994
4. FBI Number 59-0637867	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input checked="" type="checkbox"/> \$68.75 Supplemental Fees Not Required	
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent TANNENBAUM, RACHEL E. 201-BONNIE-BRAE-WAY HOLLYWOOD-FL-33021-	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 4931 N.W. 65 Avenue 83 Lauderhill 84 City FL 85 Zip Code 33319
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Rachel E. Tannenbaum* 1/27/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-VD- HELD, CHARLOTTE 2400 MAGNOLIA DRIVE N. MIAMI FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 33181
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD OSHEROFF, MARC A 1925 NE 118TH ROAD NO MIAMI FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 33181
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SCHAPIRO, JAIME 1025 N.E. 89 ST. MIAMI FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 33138
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-RD- LENNER, SANDOR- 100 S.E. 2 ST. #2200 MIAMI FL	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	VD SIROTTA, SUSAN 1771 Cleveland Road Miami Beach, FL 33141 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PONT-LYNNE- 90 EDGEWATER DR.-705- CORAL GABLES FL-	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	SD SCHWADRON, DAVID 10350 SW 125 Street Miami, FL-33176 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD- WECHSLER, NAT- 14531-ROSEWOOD-ROAD MIAMI LAKES FL-	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	TD HOFFMAN, RICHARD 1101 Brickell Ave., # 1402 Miami, FL 33131 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Charlotte A. Held* 1/27/95
Signature and typed or printed name of SIGNING OFFICER OR DIRECTOR



JEWISH VOCATIONAL SERVICE, INC.

735 N.E. 125TH STREET • NORTH MIAMI, FLORIDA 33161

ADMINISTRATION • ELDERLY SERVICES • VOCATIONAL REHABILITATION • WORKCENTER • COMMUNITY SERVICES

TELEPHONE: (305) 899-1JVS • FAX: (305) 899-8728 • TTY: (305) 899-0953 • 1-800-897-6939

TEC PROJECTS: (305) 899-8309 • NUTRITION PROJECT: (305) 899-8301 • HOMEMAKER REFERRAL SERVICE: (305) 899-8303 • 1-800-897-6940

President:
Charlotte Held

Vice Presidents:
Marc A. Osheroff
Jaime Schapiro
Susan Strotta
Jeff Stubius

Treasurer:
Richard M. Hoffman

Assistant Treasurer:
Richard K. Slavin

Secretary:
David Schwadron

Assistant Secretary:
Martin Goodman

Board of Directors:
Fern Barak
Millicent Be'dner
Lois Blume
Ronald S. Friedman
Jack Goldsworth
Mark W. Gordon, MD
Martin M. Grossman
Ronald Hinds, MD
Arthur M. Kahn
Martin A. Kalsner
Gabriela J. Landau
Hon. A. Lester Langer
Jeffrey M. Levine
Leslie Linevsky
Marylynne Newmark
Harry A. Payton
Phillip S. Plotka
Lyn J. Pont
Ira Segal
Lawrence P. Segal
Brett Sugarman
Alfred M. Swiren
Ken Tobin
Stephen A. Wayner
Nat Wechsler
Harvey Weinberg
Jay A. White
Ann Yonover-Cope

Trustees/Past Presidents:
J. Wm. Baros Jr.*
Pat P. Fine*
William Gredulek*
Fred Katz
Sandor Lenner*
Herschel G. Levy
J. David Liebman*
Lawrence R. Metsch*
Stuart Rothchild*
Dorothy F. Sandofer*
Shirley Spear*
Sandy Susman
*Past Presidents

Executive Director/CEO:
Rachel E. Tannenbaum

Assistant
Executive Directors:
Herman P. Cohen
Sylvia L. Goldsmith

January 25, 1995

Division of Corporations
Annual Reports
P O Box 1500
Tallahassee, FL 32302-1500

Dear Sir/Madam:

Enclosed please find the following:

Duly completed form, with signatures,
Officer/Board listing with addresses,
and a JVS check #012241 in the amount of \$70.00.
\$61.25 Nonprofit with IRS 501 (c) (3) Tax Exempt Status,
\$ 8.75 Certificate of Status Desired, Additional Fee
\$70.00 Total

This is in compliance with the 1995 Corporation Annual
Report as required by the State of Florida. Thank you for
processing same.

Sincerely,

Nanette C. Savage

Nanette C. Savage
Executive Secretary

Encl. 1

KOSHER KITCHEN: 87 N.W. 24TH STREET • MIAMI, FLORIDA 33127 • (305) 576-6646 • FAX: (305) 576-0113 • 1-800-897-6938

PROJECT TASK: 1201 N.W. 16TH STREET • MIAMI, FLORIDA 33125 • (305) 324-3241

RUSSIAN RESETTLEMENT: Dale: 420 LINCOLN ROAD • MIAMI BEACH, FL 33139 • (305) 532-4432 • Broward: 8358 W. Oakland Pk. Blvd., Ft. Lauderdale, FL 33351 • (305) 749-1505

CAREER AND COLLEGE COUNSELING:

NORTH DADE BRANCH: 16800 N.W. 2ND AVENUE, #10A, MIAMI, FLORIDA 33169 • (305) 652-1122 - SOUTH DADE BRANCH: 11194 N.W. 114TH AVENUE, MIAMI, FLORIDA 33176 • (305) 270-1775

HURRICANE RECOVERY EMPLOYMENT CENTER: (305) 271-9000 EXTENSION 266



BENEFICIARY AGENCY: GREATER MIAMI JEWISH FEDERATION • UNITED WAY OF DADE COUNTY
ACCREDITED BY CARF AND THE INTERNATIONAL ASSOCIATION OF COUNSELING SERVICES, INC.

