

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Nov 12, 2009
Secretary of State**

DOCUMENT# 703555

Entity Name: CUBAN-HEBREW CONGREGATION OF MIAMI, INC.

Current Principal Place of Business:

1700 MICHIGAN AVE.
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

1700 MICHIGAN AVE.
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 59-6166265 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

STABINSKI, LUIS
757 N.W. 27TH AVENUE
MIAMI, FL 33125 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: LUIS STABINSKI

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KERBEL, MARCOS
Address: 1700 MICHIGAN AVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: EVPD () Delete
Name: COHEN, REBECCA K
Address: 1700 MICHIGAN AVENUE
City-St-Zip: MIAMI BEACH, FL 33139

Title: SD () Delete
Name: GORFINKEL, RAUL
Address: 1700 MICHIGAN AVENUE
City-St-Zip: MIAMI BEACH, FL 33139

Title: VPD () Delete
Name: KABAK, IDA
Address: 1700 MICHIGAN AVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: TD (X) Delete
Name: ROSEN, BORIS
Address: 1700 MICHIGAN AVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: BODM (X) Delete
Name: BABIL, WILLIAM
Address: 1700 MICHIGAN AVE.
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: EVPD (X) Change () Addition
Name: COHEN, REBEKA K
Address: 1700 MICHIGAN AVE
City-St-Zip: MIAMI BEACH, FL 33139

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

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

Title: () Change () Addition
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: MARCOS KERBEL

PD

11/12/2009

Electronic Signature of Signing Officer or Director

Date