

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 732287

1. Entity Name

HIGH SCHOOL IN ISRAEL, INC.

**FILED**  
Jan 24, 2002 8:00 am  
Secretary of State

01-24-2002 90374 023 \*\*\*\*70.00

Principal Place of Business

Mailing Address

12550 BISCAYNE BLVD  
604  
MIAMI FL 33181  
US

12550 BISCAYNE BLVD  
604  
MIAMI FL 33131  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-0173782

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ALLEN, LOUISE  
C/O STEARNS, WEAVER, MILLER  
200 EAST BROWARD BOULEVARD  
FORT LAUDERDALE FL 33301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution.



\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VD  
BILZIN, BRIAN  
2500 FIRST UNION FINANCIAL CIRCLE  
MIAMI FL 33131 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VD  
SEAN LEDER  
6015 LELAC RD  
BOCA RATON, FL 33496 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VD  
BEBCHICK, LEONARD  
888 SIXTEENTH ST NW  
WASHINGTON DC ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VD  
FRIEDMAN, KAYLA  
1800 NE 114 ST #1205  
MIAMI FL 33181 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
SD ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VD  
BENNETT, HILDA M  
19400 N.E. 19TH AVENUE  
NORTH MIAMI BEACH FL 33179 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VD  
SANDRA MUSS  
FOUNTAIN BLVD HILTON 4441 COLLINS AVENUE  
MIAMI BEACH FL 33140 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
CD  
GILBERT, ROBERT  
220 ALHAMBRA CIRCLE  
CORAL GABLES FL 33143 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
CD  
ROBERT WERNER  
3000 ISLAND BLVD, APT 3001  
ADVENTURA, FL 33160 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

*[Signature]*

01/11/02

805-891-8868

X-208

CR2E037 (9/01)