

**2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**


**FILED**  
**Jan 23, 2006 8:00 am**  
**Secretary of State**

01-23-2006 90097 001 \*\*\*140.00

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01052006 Chg-NP CR2E037 (11/05)

<b>DOCUMENT # 737814</b>				
1. Entity Name GREATER MIAMI JEWISH FEDERATION, INC.				
Principal Place of Business 4200 BISCAYNE BLVD. MIAMI, FL 33137 US		Mailing Address 4200 BISCAYNE BLVD. MIAMI, FL 33137 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 59-0624404
				Applied For Not Applicable
		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent	
SOLOMON JACOB 4200 BISCAYNE BLVD MIAMI, FL 33137			Name	
			Street Address (P.O. Box Number is Not Acceptable)	
			City	
			FL	
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>				
<b>Filing Fee is \$61.25 Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees
		Make check payable to Florida Department of State		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	V <input type="checkbox"/> Delete	TITLE	PPDC (Past President/Director) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	KATZ, EZRA	NAME	Ezra Katz	
STREET ADDRESS	2665 S. BAYSHORE DRIVE PH-2A	STREET ADDRESS	2665 S. Bayshore Drive PH2A	
CITY-ST-ZIP	COCONUT GROVE, FL 33133	CITY-ST-ZIP	COCONUT GROVE FL 33133	
TITLE	P <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ADLER, MICHAEL	NAME		
STREET ADDRESS	1400 NW 107 AVENUE 5TH FLOOR	STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33172	CITY-ST-ZIP		
TITLE	D <input checked="" type="checkbox"/> Delete	TITLE	VD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	SCHECK, MICHAEL	NAME	Raquel Scheck	
STREET ADDRESS	215 SE 10TH AVE	STREET ADDRESS	215 SE 10th Ave	
CITY-ST-ZIP	HIALEAH, FL	CITY-ST-ZIP	Hialeah, FL 33010-5536	
TITLE	EVP <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SOLOMON, JACOB	NAME		
STREET ADDRESS	4200 BICAYNE BOULEVARD	STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33137	CITY-ST-ZIP		
TITLE	VD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BERNSTEIN, RICHARD	NAME		
STREET ADDRESS	2601 S BAYSHORE DRIVE, #1900	STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33133	CITY-ST-ZIP		
TITLE	TD <input type="checkbox"/> Delete	TITLE	TD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	KAVANA, JASON	NAME	Joseph Kavana	
STREET ADDRESS	16241 NW 48 AVE	STREET ADDRESS	16241 NW 48 Ave	
CITY-ST-ZIP	HIALEAH, FL 33014	CITY-ST-ZIP	Hialeah, FL 33014	
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 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: _____			i/16/06	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date</small>	<small>Daytime Phone #</small>