

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 743757

1. Entity Name

CONGREGATION B'NAI ISRAEL OF CORAL SPRINGS, INC.

FILED
Feb 29, 2000 8:00 am
Secretary of State

02-29-2000 90156 026 ****61.25

Principal Place of Business

4129 N.W. 88TH. AVE.
APARTMENT 106
CORAL SPRINGS FL 33065

Mailing Address

4129 N.W. 88TH. AVE.
APARTMENT 106
CORAL SPRINGS FL 33065-1882

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1944378

Applied For

Not Applicable

Zip

Country

Zip

Country

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

HERBERT DAVIS
4110 N.W. 88TH. AVE.
APARTMENT #207
CORAL SPRINGS FL 33065

Name

DAVID KARGMAN

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

4129 N.W. 88TH AVE.

APARTMENT 106

City

CORAL SPRINGS,

FL

Zip Code

33065

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

David Kargman
DAVID KARGMAN, PRESIDENT/DIRECTOR Feb. 4TH, 2000

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	D	<input checked="" type="checkbox"/> Delete
NAME	DAVIS, HERBERT	
STREET ADDRESS	4110 N.W. 88TH AVENUE	
CITY-ST-ZIP	CORAL SPRINGS FL 3065	
TITLE	SD	<input type="checkbox"/> Delete
NAME	BUSHMAN, BEATRICE	
STREET ADDRESS	4167 N.W. 90TH AVE.	
CITY-ST-ZIP	CORAL SPRINGS FL	
TITLE	P	<input type="checkbox"/> Delete
NAME	KARGMAN, DAVID	
STREET ADDRESS	4122 NW 88TH AVE	
CITY-ST-ZIP	CORAL SPRINGS FL	
TITLE	DT	<input checked="" type="checkbox"/> Delete
NAME	SCHREIBER, DAVID	
STREET ADDRESS	4275 NW 89TH AVE.	
CITY-ST-ZIP	CORAL SPRINGS, FL 00000	
TITLE	VP	<input type="checkbox"/> Delete
NAME	BLINDER, DAVID	
STREET ADDRESS	4277 NW 89TH AVE	
CITY-ST-ZIP	CORAL SPRINGS FL	
TITLE	DT	<input checked="" type="checkbox"/> Delete
NAME	FRIEDMAN, IRWIN	
STREET ADDRESS	4120 NW 88TH AVE	
CITY-ST-ZIP	CORAL SPRINGS FL 33065	

TITLE	DIRECTOR, CHAIRMAN OF BOARD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SATLOW, HYMAN	
STREET ADDRESS	3220 HOLIDAY SPRINGS BLVD	
CITY-ST-ZIP	MARGATE, FL 33063	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	DIRECTOR	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ESTHER SCHREIBER	
STREET ADDRESS	4275 N.W. 89TH AVE., APT. 101	
CITY-ST-ZIP	CORAL SPRINGS, FL 33065	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRIEDMAN, IRENE	
STREET ADDRESS	4120 N.W. 88TH AVE., APT. 205	
CITY-ST-ZIP	CORAL SPRINGS, FL 33065	

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 another like empowered.

SIGNATURE:

David Kargman
DAVID KARGMAN, PRESIDENT/DIRECTOR

Date

Daytime Phone #

Feb. 4, 2000 (954) 753-045

CR2E037 (9/99)