FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # 758744

(7)

 Corporation 	Name	(*)							
TEMPLE MESSIANIQUE, INC.									
						I 1881(1 1880) BIJAN (81)(1 1881) BIJAN (<u> </u>	N 8 (8 14 6 16 N 1988)
Principal Place	of Business	Mailing Address				A LOND IST AND DE MEIST ENTIL IN MILE OF DE	IIŲI VIVII BIBI	1 8186) 618	III BIĞIL BIBIL IŞBE
5420 N STAT	E RD 7	5420 N STATE RD 7							
P.O. BOX 606	• •	P.O. BOX 6065							
FT LAUDERDALE FL 33319-2922 FT LAUDERDALE FL 33319-2922				22		2 Date Incorporated or Ovalified	3a. Date of Last Report		
						 Date Incorporated or Qualified 06/15/1981 	54. 54	05/31/	1995
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number			Applied For
1		26				59-2339506		····	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.7	5 Additional
2	27				S. Cartinosio Si Statos Dosiros		Fee	Required	
City & State		City & State			6. Election Campaign Financing			00 May Be	
23		Zip Country			Trust Fund Contribution			led to Fees	
Ζιρ 24	Country 25	Zip 29	30	intry		8. This corporation has liability for in	itangible ta:] Yes 🔣		s. 199.032,
4	9. Name and Address of Curr		1301	Ι		Fiorida Statutes L 10. Name and Address of New Re			
	J. Halle and House of Series			81	Name				
LIPNACK, MARTIN I					0: 111	/DO D. N			
6827 W COMMERCIAL BLVD				82	Street Ador	ress (P.O. Box Number is Not Acceptable	3)		
	DERDALE FL 33319			83					
				84				[as] ·	2:- O-d-
				84	City		FL	85 2	Zip Code
11. Pursuant t	to the provisions of Sections 617,05	02 and 617.1508, Florida Statute	s, the abo	ve-r	named corpor	ration submits this statement for the purp	ose of cha	nging Its	registered office
or register familiar wi	red agent, or both, in the State of Fix th, and accept the obligations of, Se	orida. Such change was authorize ection 617.0503. Florida Statutes.	of by the o	corp	oration's boar	rd of directors. I hereby accept the appo	intment as	registere	ed agent. I am
SIGNATURE	on and adopt the obligations on	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
SIGNATURE _	Signature, typed or printed name of registered ag	ent and title if applicable (NOT	E Registered	Agen	t signature require	d when reinstating)	DATE		
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECT	
TITLE	TD	□ DELETE 1.5 T		1.1 TITLE				Change	Addition
NAME	VALBRUN, JOCELYN	DOAD BIRM OND OT		AME					
STREET ADDRESS	3240 NW 2ND ST	ET LAHDEDDALE EL		1.3 STREET ADDRESS					
CITY-ST-ZIP	FT LAUDERDALE FL	Decem	1.4 CITY		IT-ZIP			70	Addition
TITLE	PD Valbrun, Joseph	-		2.1 TITLE			L	Change	Addition
NAME	3240 NW 2ND ST			2.2 NAME					
STREET ADDRESS	FT LAUDERDALE FL	DEDDALE EL		2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP					
CITY-ST-ZIP	SD		_		ST - ZIP			Change	e
TATLE I	MALIDOLINI MADVOC			3.1 TITLE 3.2 NAME			L	பன்பும	. 🔲 2000000
STREET ADDRESS		2040 ANALOND CT			ADDRESS				
CITY-ST-ZIP	FT LAUDERDALE FL	ET LAUNEDDALE EL			ST - ZIP				
TITLE		DELETE	4.1 T		V: 411		[Change	Addition
NAME			4.21				_		
STREET ADDRESS					ADDRESS				
CITY - ST - ZIP					ST-ZIP				
TITLE		DELETE	51 TITLE		<u> </u>]	Change	Addition
NAME			5 2 NAME						
STREET ADDRESS			538	TREET	ADDRESS				
CITY-ST-ZIP			540	ITY-S	ST-ZIP				
TITLE				1 TITLE				Change	Addition
NAME			62 N	AME					
STREET ADDRESS			635	TREET	ADDRESS				
CITY-ST-ZIP					ST-ZIP				
14. I do hereb	by certify that the information supplies	ed with this filing is voluntarily furni	shed and	doe	s not qualify t	for the exemption stated in Section 119.0)7(3)(k), Flo	rida Stat	utes. 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 it changed, or on an attachment with an address.

SIGNATURE:

486-1640 Deytine Phone #