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NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 769333

Principal Place of Business	Mailing Address
1110 N.E. 163 ST.	1#10 N.E. 163 ST.
N. MIAMI BCH FL 33162	N MIAMI BCH FL 33162
US	US

Feb 26, 1999 8:00 am § Secretary of State

02-26-1999 90001 046 ****61.25

BETH JA	ACOB HIGH SCHOOL, INC.				`					
Principal Place	e of Business	Mailing Address						•		
1110 N.E. 163 N. MIAMI BCH US		1‡10 N.E. 163 ST. N MIAMI BCH FL 33162 US								
─ '	face of Business	2a. Mailing Address		. <u>.</u>		ncorporated 3/1983	or Qualifed			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			4. FEI N	umber -	· -,		Арр	lied For
22		27			59-2	335606				Applicable
City & State	e	City & State			5. Certife	ate of Statu	s Desired 🔲	\$	8.75 Ad Fee Red	
23	Carrata		Country			0	- Figuraine		\$5.00 N	·
Zip	Country 25		30		I	on Campaign Fund Contrib	- 14		Added to	,
24	9. Name and Address of Curren		JO				ss of New Regis	tered Ager	nt	
			81	Name						
SOSTCHII 2318 N. B	N, GUILLERMO		82	Street A	ddress (P.O. Bo	x Number is	Not Acceptable	02_	÷	_
	ACH FL 33140		83							
7710 HIII			84	City 1	iA 1	BEAC	#	FL 8	5 Zip C	ode
11. Pursuant	to the provisions of Sections 617.050 registered agent, or both, in the State	2 and 617.1508, Florida Statutes of Florida, Such change was all	s, the above	-named comor	orporation submation's board of	its this state	ment for the purp	ose of char appointme	nging its r ent as reg	egistered istered
office or r agent. I a SIGNATURE	m familiar with, and accept the obliga	itions of, Section 617.0503, Flore	da Statutes.	•	t		_		,	
agent. I a SIGNATURE	m familiar with, and accept the obligation of th	nt and title if applicable. (NOTE:	da Statutes. Registered Agen	•	uired when reinstating)	<u> </u>	ATE		
agent. I a SIGNATURE 12.	Signature, typed or printed name of registered agei OFFICERS AN	nt and title of applicable. (NOTE: I	Registered Agen	•	uired when reinstating)	_	ATE RS AND D		
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14. I hereby certify that the information supplied with his 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 annual tenort 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 received or this tenored to execute this report as required by Chapter 617. Florida Statutes; and that my name appears in Block 12 or Block 13 if or langed or on an attachment with all address, with all other like empowered.

SIGNATURE: