2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004
Secretary of State

DOCUMENT# N00000005238

Entity Name: HEBREW HOME OF NORTH DADE, INC.

Current Principal Place of Business:

1800 N.E. 168TH STREET
N. MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

300 71ST STREET
SUITE 445
MIAMI BEACH, FL 33141

New Mailing Address:

FEI Number: 65-1040912 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ZUBKOFF, WILLIAM
300 71ST STREET
445
MIAMI BEACH, FL 33141 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: GALBUT, RUSSELL
Address: 300 71ST STREET, STE 445
City-St-Zip: MIAMI BEACH, FL 33141

Title: D ( ) Delete
Name: ZUBKOFF, WILLIAM
Address: 300 71ST STREET, STE 445
City-St-Zip: MIAMI BEACH, FL 33141

Title: D ( ) Delete
Name: SCHWARTZ, FELICE
Address: 300 71ST STREET, STE 445
City-St-Zip: MIAMI BEACH, FL 33141

Title: D ( ) Delete
Name: KALUS, ELLIOT
Address: 300 71ST STREET, STE 445
City-St-Zip: MIAMI BEACH, FL 333141

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change ( ) Addition
Name: ZUBKOFF, WILLIAM
Address: 300 71ST STREET, STE 445
City-St-Zip: MIAMI BEACH, FL 33141

Title: SD (X) Change ( ) Addition
Name: SCHWARTZ, FELICE
Address: 300 71ST STREET, STE 445
City-St-Zip: MIAMI BEACH, FL 33141

Title: TD (X) Change ( ) Addition
Name: KALUS, ELLIOT
Address: 300 71ST STREET, STE 445
City-St-Zip: MIAMI BEACH, FL 333141

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RUSSELL GALBUT D 04/26/2004

Electronic Signature of Signing Officer or Director Date