

**NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 02, 2002 8:00 am**  
**Secretary of State**

05-02-2002 90058 027 \*\*\*\*61.25

**DOCUMENT #** N01000001612  
1. Entity Name  
HASIDIGRAPHIX, INC.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business 9240 Sable Ridge Cir. Suite, Apt. #, etc. #A City & State Boca Raton, Florida Zip 33428 Country U.S.		3. Mailing Address 9240 Sable Ridge Circle Suite, Apt. #, etc. #A City & State Boca Raton, Florida Zip 33428 Country U.S.	
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DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1082563	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name	KESSLER, ROHN	
Street Address (P.O. Box Number is Not Acceptable)	9240 SABLE RIDGE CIRCLE, #A	
City	BOCA RATON	FL Zip Code 33428

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reappointing)

<b>FEE IS \$61.25</b> Initial or Amended UBR	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	<b>Make Check Payable to Department of State</b>
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10. OFFICERS AND DIRECTORS			
TITLE NAME DPS STREET ADDRESS CITY-ST-ZIP	Kessler, Rohn 9240 Sable Ridge Circle #A Boca Raton, FL 33428	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME D STREET ADDRESS CITY-ST-ZIP	Kessler, Ninah 9240 Sable Ridge Circle #A Boca Raton, FL 33428	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME D STREET ADDRESS CITY-ST-ZIP	New, -Rabbi -Ruvi 375 NE 4th Street Boca Raton, FL 33432	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DO NOT WRITE IN THIS SPACE</b>
TITLE NAME D STREET ADDRESS CITY-ST-ZIP	Freeman, Tzvi 5729 Montgomery St. Vancouver, BC V6M 2X3 Canada	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME D STREET ADDRESS CITY-ST-ZIP	Yudin, Julian 17051 Emile, Unit 8 Boca Raton, FL 33487	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME D STREET ADDRESS CITY-ST-ZIP	Gottlieb, David, ED.D. 232 S.W. 28th Ave. Delray Beach, FL 33445	TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 on an attachment with an address, with all other like empowered.

SIGNATURE: X Pol Kessler X APRIL 21, 2002 561-470-0466  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037B (12/01)