

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 07, 2007 8:00 am
Secretary of State

08-07-2007 90026 034 ****70.00

DOCUMENT # N06000006423			
1. Entity Name VENDOME MINYAN, INC.			
Principal Place of Business 4301 COLLINS AVENUE MIAMI BEACH, FL 33140		Mailing Address 4301 COLLINS AVENUE MIAMI BEACH, FL 33140	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address <i>C/O ANDRE ENGEL</i>	
Suite, Apt. #, etc.		Suite, Apt. #, etc. <i>1748 49 ST</i>	
City & State		City & State <i>BROOKLYN NY</i>	
Zip	Country	Zip <i>11204</i>	Country <i>USA</i>
5. Certificate of Status Desired		<input checked="" type="checkbox"/> \$8.75 Additional Fee Required <input type="checkbox"/> Not Applicable	
4. FEI Number 51-0582944		Applied For Not Applicable	
7. Name and Address of New Registered Agent		Name Street Address (P.O. Box Number is Not Acceptable) City State: FL Zip Code	
5. Name and Address of Current Registered Agent		Name Street Address (P.O. Box Number is Not Acceptable) City State: FL Zip Code	
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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
Filing Fee is \$61.25 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ENGEL, ANDRE	NAME	
STREET ADDRESS	4301 COLLINS AVENUE	STREET ADDRESS	
CITY - ST - ZIP	MIAMI BEACH, FL 33140	CITY - ST - ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SPITZER, WILMOS	NAME	
STREET ADDRESS	4301 COLLINS AVENUE	STREET ADDRESS	
CITY - ST - ZIP	MIAMI BEACH, FL 33140	CITY - ST - ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROSENBERG, BERNARD	NAME	
STREET ADDRESS	4301 COLLINS AVENUE	STREET ADDRESS	
CITY - ST - ZIP	MIAMI BEACH, FL 33140	CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 all other like empowered.			
SIGNATURE: <i>[Signature]</i>		ANDRE ENGEL <i>800-922-0230</i> <i>8/1/07 ext 213</i>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	