

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011334

**FILED**  
**Apr 22, 2011**  
**Secretary of State**

**Entity Name:** AHAVAS TORAH CONGREGATION INC.

**Current Principal Place of Business:**

C/O MICHAEL I. BERNSTEIN, P.A.  
1688 MERIDIAN AVE, SUITE 418  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

301 ARTHUR GODFREY ROAD  
SUITE 301  
MIAMI BEACH, FL 33140

**Current Mailing Address:**

C/O MICHAEL I. BERNSTEIN, P.A.  
1688 MERIDIAN AVE, SUITE 418  
MIAMI BEACH, FL 33139

**New Mailing Address:**

**FEI Number:** 20-5842025      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BERNSTEIN, MICHAEL I P.A.  
1688 MERIDIAN AVENUE  
SUITE 418  
MIAMI BEACH, FL 33139 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  
Name: SABO, NICHOLAS J  
Address: 4101 PINETREE DRIVE  
City-St-Zip: MIAMI BEACH, FL 33140

Title: D  
Name: SEGELMAN, SHIMON  
Address: 3725 PINETREE DRIVE  
City-St-Zip: MIAMI BEACH, FL 33140

Title: D  
Name: SHAWEL, AKIVA M  
Address: 4101 PINETREE DRIVE  
City-St-Zip: MIAMI BEACH, FL 33140

Title: D  
Name: SPERO, MORDICHAJ  
Address: 481 NE 189TH STREET  
City-St-Zip: MIAMI, FL 33179

Title: D  
Name: NEUHAUS, HERSH RABBI  
Address: 3160 SHERIDAN AVENUE  
City-St-Zip: MIAMI BEACH, FL 33140

I hereby 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 all other like empowered.

SIGNATURE: NICHOLAS J SABO DDS

D

04/22/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date