

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010120

Entity Name: CHABAD OF TAMARAC, INC

FILED  
Jul 09, 2008  
Secretary of State

## Current Principal Place of Business:

9013 NW 38TH DRIVE  
208  
CORAL SPRINGS, FL 33065 US

## New Principal Place of Business:

## Current Mailing Address:

9013 NW 38TH DRIVE  
208  
CORAL SPRINGS, FL 33065 US

## New Mailing Address:

FEI Number: 26-1246779      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

## Name and Address of New Registered Agent:

ENGEL, MENACHEM M RABBI  
9013 NW 38TH DRIVE  
208  
CORAL SPRINGS, FL 33065 US

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: P ( ) Delete  
Name: ENGEL, MENACHEM M RABBI  
Address: 9013 NW 38TH DRIVE 208  
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: D ( ) Delete  
Name: KUBIE, NORMAN  
Address: 9781 NW 2ND STREET  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: D ( ) Delete  
Name: LICH, PERLA  
Address: 7127 N PINE ISLAND RD  
City-St-Zip: TAMARAC, FL 33321

Title: D ( ) Delete  
Name: GOBER, GEORGE  
Address: 7809 W COMMERCIAL BLVD  
City-St-Zip: TAMARAC, FL 33351

Title: D ( ) Delete  
Name: OSHINS, ALAN  
Address: 7146 NOB HILL RD  
City-St-Zip: TAMARAC, FL 33321

Title: D ( ) Delete  
Name: COHEN, SHELLY  
Address: 7142 NOB HILL RD  
City-St-Zip: TAMARAC, FL 33321

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: M. ENGEL

P

07/09/2008

Electronic Signature of Signing Officer or Director

Date