2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25169

Entity Name: MIAMI BEACH ERUV COUNCIL, INC.

FILED Jan 06, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Frincipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

999 WASHINGTON AVENUE MIAMI BEACH, FL 33139

Current Mailing Address: New Mailing Address:

999 WASHINGTON AVENUE MIAMI BEACH, FL 33139

FEI Number: 65-0041114 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

GALBUT, ABRAHAM A. 999 WASHINGTON AVE. MIAMI BEACH, FL 33139 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:

Clastera is Cinneting of Decistors of August

Electronic Signature of Registered Agent

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

 Title:
 D () Delete
 Title:
 D (X) Change () Addition

 Name:
 KOENIGSBERG, PAUL
 Name:
 FROHLICH, SETH

 Address:
 4775 N. BAY ROAD
 Address:
 3126 PINE TREE DRIVE

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:
 MIAMI BEACH, FL 33140

Title: D () Delete Title: D (X) Change () Addition Name: GALBUT, ABRAHAM A., Name: GALBUT, ABRAHAM A.,

Address: 4425 N. MICHIGAN AVE. Address: 3559 PINE TREE DRIVE
City-St-Zip: MIAMI BEACH, FL 33140 City-St-Zip: MIAMI BEACH, FL 33140

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$

 Name:
 SCHECHTER, PINCHAS
 Name:
 WASSERMAN, MARTIN

 Address:
 840 W. 43 CT
 Address:
 960 - 41 STREET

 City-St-Zip:
 MIAMI BEACH, FL 33140
 City-St-Zip:
 MIAMI BEACH, FL 33140

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: ABRAHAM A. GALBUT PRES 01/06/2004