

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 19, 2005
Secretary of State**

DOCUMENT# N93000004880

Entity Name: AGUDATH ISRAEL HEBREW INSTITUTE, INC.

Current Principal Place of Business:

7801 CARLYLE AVENUE
MIAMI BEACH, FL 33141

New Principal Place of Business:

Current Mailing Address:

1910 ALTON RD
MIAMI BEACH, FL 33139 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

ZWEIG, YITZCHAK
1910 ALTON RD
MIAMI BCH, FL 33137 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: PD () Delete
Name: HILL, IRA
Address: 1910 ALTON RD
City-St-Zip: MIAMI BEACH, FL 33139

Title: VPD () Delete
Name: SIMON, MILTON
Address: 1910 ALTON RD
City-St-Zip: MIAMI BEACH, FL

Title: STD () Delete
Name: GALBUT, ABRAHAM
Address: 1910 ALTON RD
City-St-Zip: MIAMI BEACH, FL

Title: S () Delete
Name: GALBOT, ABRAHAM
Address: 1910 ALTOIN RD
City-St-Zip: NORTH MIAMI BEACH, FL

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:

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: MILTON SIMON

Electronic Signature of Signing Officer or Director

VPD

04/19/2005

Date