

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 15, 2009
Secretary of State**

DOCUMENT# N93000004880

Entity Name: AGUDATH ISRAEL HEBREW INSTITUTE, INC.

Current Principal Place of Business:

1910 ALTON RD
MIAMI BEACH, FL 33139

New Principal Place of Business:

4000 ALTON ROAD
MIAMI BEACH, FL 33140

Current Mailing Address:

1910 ALTON RD
MIAMI BEACH, FL 33139 US

New Mailing Address:

4000 ALTON ROAD
MIAMI BEACH, FL 33140

FEI Number: 59-1571122 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:

ZWEIG, YITZCHAK
1910 ALTON RD
MIAMI BCH, FL 33137 US

Name and Address of New Registered Agent:

ZWEIG, YITZCHAK
4000 ALTON ROAD
MIAMI BCH, FL 33140 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: YITZCHAK ZWEIG

10/15/2009

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: ZWEIG, JEROME M
Address: 1910 ALTON RD
City-St-Zip: MIAMI BEACH, FL

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HILL, IRA
Address: 4000 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL 33140

Title: VPD (X) Change () Addition
Name: SIMON, MILTON
Address: 4000 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL 33140

Title: STD (X) Change () Addition
Name: ZWEIG, JEROME M
Address: 4000 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL 33140

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: IRA HILL

PD

10/15/2009

Electronic Signature of Signing Officer or Director

Date