

FILE NOW: FILING FEE IS \$61.25

FILED

**Jul 16 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # N96000004704 (0)
 1. Corporation Name
KING DAVID SOCIETY INTERNATIONAL, INC.



Principal Place of Business 7006 HUNTINGTON LANE #104 BLDG. 12 DELRAY BEACH FL 33446	Mailing Address 765A E NEW YORK AVE. BROOKLYN NY 11203
--	--

3. Date Incorporated or Qualified 09/10/1996	Applied For <input type="checkbox"/> Not Applicable
4. FEI Number 36-4087152	
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
	Zip 29
	Country 30

9. Name and Address of Current Registered Agent

**RABBI DAVID MARCIANO ISHAI
7006 HUNTINGTON LANE #104 BLDG. 12
DELRAY BEACH FL 33446**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Rabbi David Marciano Ishai **RABBI DAVID MARCIANO-ISHAI** **PRESIDENT** **2/30/98**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	YISHAI, RABBI DAVID M B	
STREET ADDRESS	7006 HUNTINGTON LANE #104 BLDG. 12	
CITY-ST-ZIP	DELRAY BEACH FL	
TITLE	DVP	<input type="checkbox"/> DELETE
NAME	GREENSPAN, HARRY	
STREET ADDRESS	7006 HUNTINGTON LN	
CITY-ST-ZIP	DELRAY BCH FL	
TITLE	DVP	<input type="checkbox"/> DELETE
NAME	MARCIANO, BECKY	
STREET ADDRESS	2333 N 68TH ST	
CITY-ST-ZIP	WAUWATOSA WI	
TITLE	DS	<input type="checkbox"/> DELETE
NAME	DR MALVIN J LANCY	
STREET ADDRESS	1515 S PENSERVILLE DR	
CITY-ST-ZIP	STENSVILLE MD	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE Rabbi David Marciano Ishai **RABBI DAVID MARCIANO-ISHAI** **PRESIDENT** **2/30/98**

CR2E037 (10/97)