

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 07, 2001 8:00 am**  
**Secretary of State**

03-07-2001 90142 001 \*\*\*\*61.25  
 03-07-2001 90142 002 \*\*\*\*\*8.75

**DOCUMENT # N96000004704**

1. Entity Name  
**KING DAVID SOCIETY INTERNATIONAL, INC. NP**

Principal Place of Business  
**7006 HUNTINGTON LANE #104 BLDG. 12  
 DELRAY BEACH FL 33446**

Mailing Address  
**BRANCH MOVED  
 765A E NEW YORK AVE.  
 BROOKLYN NY 11209**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address  
**453 BEACH 40TH ST**

Suite, Apt. #, etc.

Suite, Apt. #, etc.  
**APT 2D**

City & State

City & State  
**FAR ROCKAWAY, N.Y**

4. FEI Number  
**36-4087152**

Applied For  
 Not Applicable

Zip

Country

Zip  
**11691**

Country

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:  
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

**\$5.00 May Be Added to Fees**

**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**PD  
 YISHAI, RABBI DAVID M B  
 7006 HUNTINGTON LANE #104 BLDG. 12  
 DELRAY BEACH FL**  Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**PR  
 MORIS MARCIANO ISHAI  
 765A E NY AVE. BROOKLYN NY 11209**  Change  Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**DVP  
 GREENSPAN, HARRY  
 7006 HUNTINGTON LN  
 DELRAY BCH FL**  Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 Change  Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**DVP  
 MARCIANO, BECKY -  
 2333 N 68TH ST  
 WAUWATOSA WI**  Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 Change  Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**DS  
 DR MALVIN J LANCY  
 1515 S PENSERVILLE DR  
 STENSVILLE MD**  Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 Change  Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 Change  Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 Change  Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **RABBI DAVID ISHAI**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

**PRESIDENT 2.7.01 718-477-5351**

CR2E037 (10/00)