2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 03, 2002 8:00 am
Secretary of State
09-03-2002 90166 042 ****61.25

DOCUMENT # N99000001664

1. Entity Name

NEIR AURAHAM BACHARIAN SEPHARDIC CENTER, INC.

Principal Place of Business	Mailing Address
2470 N.E. 200 ST. N. MIAMI BEACH FL 33180	2470 N.E. 200 ST. N. MIAMI BEACH FL 33180

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2676 NE 204TH TERRACE	2676 NE 204TH TERRACE
Suite, Apt. #, etc.: N	Suite, Apt. #, etc.: 0
City & State: N. MIAMI BEACH, FL	City & State: N. MIAMI BEACH, FL
Zip: 33180 Country: DADE	Zip: 33180 Country: U.S.A.

4. FEI Number 11-6747065 ☐ Applied For ☐ Not Applicable

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
AMINOV, ISRAEL 2470 N.E. 200 ST. N. MIAMI BEACH FL 33180	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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

After September 13, 2002, min. will be $236.25.

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 AMINOV, ISRAEL 2470 NE 200TH ST MIAMI FL 33180	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V ARONOV, SALAMON 19416 NE 26TH AVE N. MIAMI BCH FL 33180	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD AMINOV, STELLA 2470 NE 200TH ST N. MIAMI BCH FL 33180	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD ARABOV, RACHAEL 19920 NE 21ST AVE N.MIAMI BCH FL 33180	☐ 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

CR2E037 (4/02)

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: [signature] REQUIRED Solomon M. Aronov 8/1/02 3059332478