2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2000 8:00 am
Secretary of State
02-05-2000 90049 016 ****61.25

DOCUMENT # P25421

1. Entity Name

ISRAEL CANCER RESEARCH FUND INC.

Principal Place of Business	Mailing Address
1290 AVENUE OF THE AMERICAS NEW YORK NY 10104	1290 AVENUE OF THE AMERICAS NEW YORK NY 10104-0101

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 51-0181215 | Applied For | Not Applied For

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
GELLER, SIDNEY THE ISLE AT MISSION BAY 10810 SANTA ROSA DR. BOCA RATON FL 33498	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	PD	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	HIRSHAUT, YASHAR		NAME		
STREET ADDRESS	860 FIFTH AVE.		STREET ADDRESS		
CITY-ST-ZIP	NEW YORK CITY NY		CITY-ST-ZIP		
TITLE	V	☒ Delete	TITLE	FIRST VICE PRESIDENT	☒ Change ☐ Addition
NAME	RATNER, LYNN		NAME	ROSENBAUM, ALFRED	
STREET ADDRESS	12 EAST 86TH STREET		STREET ADDRESS	945 FIFTH AVENUE	
CITY-ST-ZIP	NEW YORK NY		CITY-ST-ZIP	NEW YORK, NY 10021	
TITLE	D	☐ Delete	TITLE		☒ Change ☐ Addition
NAME	BRAUSE, LOUIS		NAME		
STREET ADDRESS	52 VANDERBILT AVENUE		STREET ADDRESS	52 VANDERBILT AVENUE	
CITY-ST-ZIP	NEW YORK NY		CITY-ST-ZIP		
TITLE	S	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	POBINER, HERBERT		NAME		
STREET ADDRESS	535 EAST 86TH ST.		STREET ADDRESS		
CITY-ST-ZIP	NEW YORK NY		CITY-ST-ZIP		
TITLE	T	☒ Delete	TITLE	TREASURER	☒ Change ☐ Addition
NAME	GROSSMANN, EDWARD A		NAME	WEISMAN, NORMAN I.	
STREET ADDRESS	LAMBS LANE		STREET ADDRESS	119 N. PARK AVE., STE. 402	
CITY-ST-ZIP	CRESSKILL NJ		CITY-ST-ZIP	ROCKVILLE CTR., NY 11570	
TITLE	C	☒ Delete	TITLE	CHAIRMAN	☒ Change ☐ Addition
NAME	FRIEDMAN, S. DONALD		NAME	SUSSKIND, LEAH	
STREET ADDRESS	1165 FIFTH AVE.		STREET ADDRESS	440 WEST END AVENUE	
CITY-ST-ZIP	NEW YORK NY		CITY-ST-ZIP	NEW YORK, NY 10024	

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 RECEIVED LEAH SUSSKIND, CHAIRMAN Jan. 26. 2000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #