

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 26, 2007 8:00 am
Secretary of State

02-26-2007 90076 035 ****61.25

DOCUMENT # N03000008832

1. Entity Name

CONGREGATION BETH JACOB, INC.



Principal Place of Business

2400 PINE TREE DR.
MIAMI BEACH FL 33140

Mailing Address

2400 PINE TREE DR.
MIAMI BEACH FL 33140

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-0637826

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/06)



6. Name and Address of Current Registered Agent

WEBER, MARTIN
635 11TH ST #1
MIAMI BEACH FL 33139

7. Name and Address of New Registered Agent

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

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP
V
NELSON, JONATHAN
11520 N BAYSHORE DR
MIAMI FL 33181

TITLE ☒ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP
V
TERRICK, MURRAY
350 COLLINS AVE #308
MIAMI BEACH FL 33139
~~NO LONGER MEMBER~~

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP
NORMAN SCHWARTZ
1951 NE 194 DR.
N. MIAMI BEACH 33179
TREASURER

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP
D
REVAT, SOL H
15945 NW 82 CT
MIAMI LAKES FL 33016

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP
D
BALKIN, JOAN
611 86TH ST
MIAMI BEACH FL 33141

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP
D
FRANK, BERNARD JUDGE
7441 WAYNE AVE #7B
MIAMI BEACH FL 33141

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP
D
GREEN, HENRY DR
6390 SW 69TH ST
MIAMI FL 33143

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #