2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 11, 2009
Secretary of State

DOCUMENT# N94000004337

Entity Name: BAIS MEDRASH OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

1190 NE 176TH ST
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

1190 NE 176TH ST
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: 65-0157570 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CHESAL, MICHAEL B
201 S. BISCAYNE BLVD
SUITE 1970
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	DP	( ) Delete
Name:	CHESAL, MICHAEL	
Address:	201 S. BISCYANE BLVD	
City-St-Zip:	MIAMI, FL	
Title:	DV	( ) Delete
Name:	BRAUSER, JOEL	
Address:	5130 N. HILLS DR.	
City-St-Zip:	HOLLYWOOD, FL	
Title:	D	( ) Delete
Name:	TILLES, DAVID	
Address:	801 S SURF RD	
City-St-Zip:	HOLLYWOD, FL	
Title:	DS	( ) Delete
Name:	YACHNES, AVROHOM RABBI	
Address:	1190 NE 176TH ST	
City-St-Zip:	NORTH MIAMI BEACH, FL 33162	
Title:	D	( ) Delete
Name:	TAMIR, SAMMY	
Address:	17020 NE 8TH PL	
City-St-Zip:	N. MIAMI BEACH, FL	
Title:	D	( ) Delete
Name:	PARITZKY, MICHAEL D	
Address:	955 NE 173RD ST.	
City-St-Zip:	N. MIAMI, FL	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RABBI AVROHOM YACHNES DS 05/11/2009

Electronic Signature of Signing Officer or Director — Date