

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768087

Entity Name: THE ALEPH INSTITUTE, INC.

Current Principal Place of Business:

9540 COLLINS AVE
SURFSIDE, FL 33154

Current Mailing Address:

9540 COLLINS AVE
SURFSIDE, FL 33154 US

FEI Number: 59-2291627

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LIPSKAR, JOSEPH
9540 COLLINS AVENUE
SURFSIDE, FL 33154 US

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

Officer/Director Detail :

Title PD
Name RUBIN, LLOYD PD
Address 9540 COLLINS AVENUE
City-State-Zip: SURFSIDE FL 33154

Title VPD
Name KAHN, SONNY
Address 9540 COLLINS AVE
City-State-Zip: SURFSIDE FL

Title ST
Name BORUCH, DUCHMAN
Address 9540 COLLINS AVE
City-State-Zip: SURFSIDE FL

Title C
Name LIPSKAR, SHOLOM D
Address 9540 COLLINS AVE
City-State-Zip: SURFSIDE FL 33154

I hereby 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 all other like empowered.

SIGNATURE: SHOLOM D LIPSKAR

C

03/23/2014

Electronic Signature of Signing Officer/Director Detail

Date