

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000005237

**Entity Name:** HEBREW HOMES HEALTH NETWORK, INC.

**Current Principal Place of Business:**

4 FRANKLIN COURT  
EAST BRUNSWICK, NJ 08816

**Current Mailing Address:**

4 FRANKLIN COURT  
EAST BRUNSWICK, NJ 08816 US

**FEI Number: 65-1040936**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

GALBUT, ABRAHAM A.  
4770 BISCAYNE BLVD  
STE 1400  
MIAMI, FL 33137 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: ABRAHAM A. GALBUT**

**04/24/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, VP  
Name ROZSANSKY, BEN  
Address 16855 NE 2ND AVE UNIT N400  
City-State-Zip: NORTH MIAMI BEACH FL 33162

Title DIRECTOR, SECRETARY,  
TREASURER  
Name WASSERMAN, MARTY  
Address 16855 NE 2ND AVE UNIT N400  
City-State-Zip: NORTH MIAMI BEACH FL 33162

Title CEO  
Name FRUHMANN, HARRY  
Address 16855 NE 2ND AVENUE  
STE N400  
City-State-Zip: NORTH MIAMI BEACH FL 33162

*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: HARRY FRUHMANN**

**CEO**

**04/24/2023**

Electronic Signature of Signing Officer/Director Detail

Date