

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000005237

**Entity Name:** HEBREW HOMES HEALTH NETWORK, INC.**Current Principal Place of Business:**16855 NE 2ND AVE UNIT N400  
NORTH MIAMI BEACH, FL 33162**Current Mailing Address:**16855 NE 2ND AVE UNIT N400  
NORTH MIAMI BEACH, FL 33162 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

04/28/2022

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

04/28/2022

Electronic Signature of Signing Officer/Director Detail

Date