

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000007609

Entity Name: CHESED AVRAHAM ZEV - THE DR. ABE CHAMES
FOUNDATION, INC.**FILED**
Jan 20, 2015
Secretary of State
CC2546635825**Current Principal Place of Business:**201 SOUTH BISCAYNE BOULEVARD
27TH FLOOR
MIAMI, FL 33131**Current Mailing Address:**201 SOUTH BISCAYNE BOULEVARD
27TH FLOOR
MIAMI, FL 33131 US**FEI Number: 27-0542408****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CHAMES, DEBORAH S ESQ.
201 SOUTH BISCAYNE BOULEVARD
27TH FLOOR
MIAMI, FL 33131 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: DEBORAH S. CHAMES****01/20/2015**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** PRES
Name CHAMES, DEBORAH S ESQ.
Address 201 SOUTH BISCAYNE BOULEVARD
27TH FLOOR
City-State-Zip: MIAMI FL 33131**Title** DIRC
Name SHALOLASHVILI, MELISSA S
Address 5978 S.W. 37TH AVENUE
City-State-Zip: FT.LAUDERDALE FL 33312**Title** DIRC
Name KIRSCHENBAUM, ARI
Address 17140 N.E. 12TH AVENUE
City-State-Zip: NORTH MIAMI BEACH FL 33162**Title** VICE
Name CHAMES, JONATHAN A
Address ABRAHAM ESTATES PROPERTY
MANAGEMENT LLC
POST OFFICE BOX 402492
City-State-Zip: MIAMI BEACH FL 33140**Title** DIRC
Name KAHN, TOBY
Address 4630 PINE TREE DRIVE
City-State-Zip: MIAMI BEACH FL 33140

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: DEBORAH S. CHAMES**PRESIDENT****01/20/2015**

Electronic Signature of Signing Officer/Director Detail

Date