DOCUMENT# N14000004626				Jan 02, 2015
Entity Name: SUNNY ISLES BEACH JEWISH COMMUNITY CENTER, INC.			NC.	Secretary of State CC9120993439
403 POINCIAN	ncipal Place of Business: A DRIVE BEACH, FL 33160			CC9120993439
Current Mai	iling Address:			
403 POINCI SUNNY ISLI	ANA DRIVE ES BEACH, FL 33160 US			
FEI Number: 46-5663750 Certificate			Certificate of	Status Desired: No
Name and A	Address of Current Registered Agent:			
A. ROTH & CO 403 POINCIAN	. PUBLIC ACCOUNTANTS A DRIVE			
	BEACH, FL 33160 US			
SUNNY ISLES		stered office or regis	tered agent, or both,	in the State of Florida.
SUNNY ISLES	BEACH, FL 33160 US	stered office or regis	tered agent, or both,	in the State of Florida. 01/02/2015
SUNNY ISLES	BEACH, FL 33160 US d entity submits this statement for the purpose of changing its regis	stered office or regis	tered agent, or both,	
SUNNY ISLES The above name SIGNATURE	BEACH, FL 33160 US d entity submits this statement for the purpose of changing its regis E: AVROHOM N. ROTH	stered office or regis	tered agent, or both,	01/02/2015
SUNNY ISLES The above name SIGNATURE	BEACH, FL 33160 US d entity submits this statement for the purpose of changing its regis E: <u>AVROHOM N. ROTH</u> Electronic Signature of Registered Agent	tered office or regis	tered agent, or both,	01/02/2015
SUNNY ISLES The above name SIGNATURE Officer/Dire	<ul> <li>BEACH, FL 33160 US</li> <li>d entity submits this statement for the purpose of changing its regis</li> <li>E: AVROHOM N. ROTH</li> <li>Electronic Signature of Registered Agent</li> <li>Ctor Detail :</li> </ul>			01/02/2015 Date
SUNNY ISLES The above name SIGNATURE Officer/Dire Title	BEACH, FL 33160 US d entity submits this statement for the purpose of changing its regis E: AVROHOM N. ROTH Electronic Signature of Registered Agent Ctor Detail : D	Title	D	01/02/2015 Date
SUNNY ISLES The above name SIGNATURE Officer/Dire Title Name	<ul> <li>BEACH, FL 33160 US</li> <li>d entity submits this statement for the purpose of changing its regis</li> <li>AVROHOM N. ROTH</li> <li>Electronic Signature of Registered Agent</li> <li>Ctor Detail :</li> <li>D</li> <li>KALLER, ALEXANDER</li> <li>403 POINCIANA DRIVE</li> </ul>	Title Name Address	D KEIFITZ, MIKHA	01/02/2015 Date EL ES BLVD #3
SUNNY ISLES The above name SIGNATURE Officer/Dire Title Name Address	<ul> <li>BEACH, FL 33160 US</li> <li>d entity submits this statement for the purpose of changing its regis</li> <li>AVROHOM N. ROTH</li> <li>Electronic Signature of Registered Agent</li> <li>Ctor Detail :</li> <li>D</li> <li>KALLER, ALEXANDER</li> <li>403 POINCIANA DRIVE</li> </ul>	Title Name Address	D KEIFITZ, MIKHA 250 SUNNY ISLI	01/02/2015 Date EL ES BLVD #3
SUNNY ISLES The above name SIGNATURE Officer/Dire Title Name Address City-State-Zip:	<ul> <li>BEACH, FL 33160 US</li> <li>d entity submits this statement for the purpose of changing its regis</li> <li>E: AVROHOM N. ROTH <ul> <li>Electronic Signature of Registered Agent</li> </ul> </li> <li>Ctor Detail : <ul> <li>D</li> <li>KALLER, ALEXANDER</li> <li>403 POINCIANA DRIVE</li> <li>SUNNY ISLES FL 33160</li> </ul> </li> </ul>	Title Name Address	D KEIFITZ, MIKHA 250 SUNNY ISLI	01/02/2015 Date EL ES BLVD #3
SUNNY ISLES The above name SIGNATURE Officer/Dire Title Name Address City-State-Zip: Title	BEACH, FL 33160 US d entity submits this statement for the purpose of changing its regis E: AVROHOM N. ROTH Electronic Signature of Registered Agent Ctor Detail : D KALLER, ALEXANDER 403 POINCIANA DRIVE SUNNY ISLES FL 33160 D	Title Name Address	D KEIFITZ, MIKHA 250 SUNNY ISLI	01/02/2015 Date EL ES BLVD #3

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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.

D

SIGNATURE: ALEXANDER KALLER

Electronic Signature of Signing Officer/Director Detail

01/02/2015

FILED