#### 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: JACK E MAMIYE

Electronic Signature of Signing Officer/Director Detail

Officer/Director Detail : Р Title Title V Name MAMIYE, JACK E Name MOSSERI, RAYMOND 1950 S. OCEACN DRIVE APT #11Q Address Address 1958 S OCEAN DRIVE APT #19Q HALLANDALE BEACH FL 33009 HALLANDALE BEACH FL 33009 City-State-Zip: City-State-Zip:

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:

Title

FEI Number: 81-1790041

# Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

MAMIYE, JACK E 1950 S. OCEACN DRIVE APT #11Q HALLANDALE BEACH, FL 33009 US

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# 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT# N15000003951

Entity Name: SEPHARDIC HEMISPHERE MINYAN CORP.

## **Current Principal Place of Business:**

1950 S. OCEACN DRIVE APT #11Q HALLANDALE BEACH. FL 33009

#### **Current Mailing Address:**

1950 S OCEAN DRIVE APT #11Q C/O MR. JACK E. MAMIYE. PRESIDENT HALLANDALE BEACH, FL 33009

Certificate of Status Desired: Yes

Date

Name COHEN, MICHAEL Address 1958 S OCEAN DRIVE APT #21P HALLANDALE BEACH FL 33009 City-State-Zip:

Date

FILED Jan 27, 2019 Secretary of State 4418804201CC

PRESIDENT

01/27/2019