

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

DOCUMENT# N21000010009

**Entity Name:** YOUTH PROGRAMS AT CHABAD LUBAVITCH OF GREATER FORT LAUDERDALE, INC.

**FILED**  
**Mar 10, 2022**  
**Secretary of State**  
**5481037953CC**

**Current Principal Place of Business:**

3500 N OCEAN BLVD  
FT. LAUDERDALE, FL 33308

**Current Mailing Address:**

3500 N OCEAN BLVD  
FT. LAUDERDALE, FL 33308

**FEI Number: 87-2362286**

**Certificate of Status Desired: No**

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

LAZARUS, DAVID M  
20295 N.E. 29 PLACE  
SUITE 200  
AVENTURA, FL 33180 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name FAYERSHTEYN, MENDEL  
Address 3500 N. OCEAN BLVD.  
City-State-Zip: FORT LAUDERDALE FL 33308

Title VPSD  
Name FAYERSHTEYN, GITTY  
Address 3500 N. OCEAN BLVD.  
City-State-Zip: FORT LAUDERDALE FL 33308

Title D  
Name LIPSZYC, MOISHE M  
Address 3500 N. OCEAN BLVD.  
City-State-Zip: FORT LAUDERDALE FL 33308

*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: GITTY FAYERSHTEYN**

**VPSD**

**03/10/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date