

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000001955

**Entity Name:** HEBREW EDUCATORS ALLIANCE, INC.

**Current Principal Place of Business:**

460 WEST 43RD STREET  
MIAMI BEACH, FL 33140

**Current Mailing Address:**

460 WEST 43RD STREET  
MIAMI BEACH, FL 33140 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

SCHAPIRO, MRS. TIRTZA  
460 WEST 43RD STREET  
MIAMI BEACH, FL 33140 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 SCHAPIRO, TIRTZA  
Address 460 WEST 43RD STREET  
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:** TIRTZA SCHAPIRO

PD

04/22/2015

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

\_\_\_\_\_ Date