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**Feb 25 1997 8:00am
Secretary of State**

**NONPROFIT
CORPORATION
ANNUAL REPORT
1997**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 701428 (5)

1. Corporation Name
TEMPLE MENORAH INC.



Principal Place of Business
**620 75TH ST
MIAMI BEACH FL 33141
US**

Mailing Address
**620 75TH ST
MIAMI BEACH FL 33141-2200**

3. Date Incorporated or Qualified **09/14/1960** 3a. Date of Last Report **03/22/1996**

4. FEI Number **59-0737892** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

**MINSKI, GEORGE
20803 BISCAYNE BLVD
2ND FLOOR
MIAMI FL 33179**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE DELETE

NAME **TD MATZ, ISAAC**

STREET ADDRESS **6550 ALLYSON RD**

CITY - ST - ZIP **MIAMI FL 33141**

TITLE DELETE

NAME **PD MEZVASOITZ, SALOMON H**

STREET ADDRESS **1792 CLEVELAND DR**

CITY - ST - ZIP **MIAMI BEACH FL 33141**

TITLE DELETE

NAME **SD LANES, ROSALIND**

STREET ADDRESS **5965 PINETREE DR**

CITY - ST - ZIP **MIAMI BEACH FL 33140**

TITLE DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME **TD MARTIN NEZADOV**

1.3 STREET ADDRESS **1630 DAYTONIA RD.**

1.4 CITY - ST - ZIP **MIAMI BEACH FL 33141**

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS **VB 2-25**

5.4 CITY - ST - ZIP

6.1 TITLE Change Addition

6.2 NAME **600002099926**

6.3 STREET ADDRESS **-02/27/97--01054--020**

6.4 CITY - ST - ZIP *****61.25**

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* **SALOMON MEZVASOITZ** **2/14/97**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 00000000

CR2E037 (9/96)