2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708337

FILED Apr 20, 2009 Secretary of State

Entity Name: TEMPLE BETH TOV, AHAVAT SHALOM, INC.

Current Principal Place of Business: New Principal Place of Business:

6438 SW 8TH STREET WEST MIAMI, FL 33144 US

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 440226 WEST MIAMI, FL 33144

FEI Number: 59-2228600 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SANDLER, BENNO 6319 SW 127TH CT MIAMI, FL 33183

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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete GONZALEZ, ROBERTO SANDLER, BENNO Name: Name: 6246 SW 136TH CT #107 Address: 6319 S W 127TH CT Address:

City-St-Zip: MIAMI, FL 33183 City-St-Zip: MIAMI, FL 33183

Title: 1VPD () Delete Title: 1VPD (X) Change () Addition SANDLER, BENNO Name: BERK, CHARLES Name:

Address: 6319 SW 187TH CT Address: 25100 S W 147TH AVENUE City-St-Zip: MIAMI, FL 33183 City-St-Zip: HOMESTEAD, FL 33032

Title: SVP () Delete Title: () Change () Addition

KLIEMAN, CHARLOTTE Name: Name: Address: 9921 SW 99 ST Address: City-St-Zip: MIAMI, FL 33176 City-St-Zip:

Title: SD () Delete Title: SD (X) Change () Addition KORBRITZ, DOROTHY Name: Name: GLASSMAN, RUTH

5802 CORAL WAY Address: Address: 6831 S W 147TH AVE 2G City-St-Zip: MIAMI, FL City-St-Zip: MIAMI, FL 33193

Title: () Delete Title: (X) Change () Addition

SWEENEY, SHIRLEY SWEENEY, SHIRLEY Name: Name: 3731 N W 2ND ST 37312 W. 2ND ST Address: Address: City-St-Zip: MIAMI, FL 33126 City-St-Zip: MIAMI, FL 33126

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SHIRLEY SWEENEY TD 04/20/2009