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FILED
May 14 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 # 709339 (6)

Corporation Name
TEMPLE BETH ISRAEL, INC.

Principal Place of Business

Mailing Address

7100 W OAKLAND PARK BLVD
SUNRISE FL 33315

7100 W OAKLAND PARK BLVD
SUNRISE FL 33313-1015



3. Date Incorporated or Qualified
07/20/1965

3a. Date of Last Report
05/01/1996

4. FEI Number
59-1113470

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

10. Name and Address of New Registered Agent

LIPNACK, MARTIN
7421 SW 20TH ST.
PLANTATION FL 33317

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	SHAPIRO, RICK	
STREET ADDRESS	1760 NW 107 TERR	
CITY-ST-ZIP	PLANTATION FL	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	DRUJAK, ARTHUR	
STREET ADDRESS	10123 NW 13TH CT	
CITY-ST-ZIP	PLANTATION FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	BERGMAN, AMI	
STREET ADDRESS	9760 NW 17TH ST.	
CITY-ST-ZIP	PLANTATION FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	DRUSS, LEWIS	
STREET ADDRESS	9421 SEA TURTLE MANOR	
CITY-ST-ZIP	PLANTATION FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	DEICH, CHARLES	
STREET ADDRESS	7380 NW 54TH COURT	
CITY-ST-ZIP	LAUDERHILL FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	RICHSTONE, NAT	
STREET ADDRESS	5171 OAKLAND PARK BLVD. #P-209	
CITY-ST-ZIP	LAUDERDALE LAKES FL	

1.1 TITLE	President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Arthur Drujak	
1.3 STREET ADDRESS	10123 NW 13 Ct	
1.4 CITY-ST-ZIP	Plantation, FL 33322	
2.1 TITLE	Vice-President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Dr. Aaron Wolfson	
2.3 STREET ADDRESS	9920 NW 11 Street	
2.4 CITY-ST-ZIP	Plantation, FL 33322	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	SECY.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	SUSAN KRONGOLD	
6.3 STREET ADDRESS	9961 N.W. 58 Ct	
6.4 CITY-ST-ZIP	Parkland, FL 33076-2549	

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 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.

CR2E037 (9/96)