

# 2001 UNIFORM BUSINESS REPORT (UBR)

4/16

**FILED**  
**May 05, 2001 8:00 am**  
**Secretary of State**

04-16-2001 90282 039 \*\*\*\*61.25

**DOCUMENT # 709339**

1. Entity Name

**TEMPLE BETH ISRAEL, INC.**

Principal Place of Business

**7100 W OAKLAND PARK BLVD  
 SUNRISE FL 33313**

Mailing Address

**7100 W OAKLAND PARK BLVD  
 SUNRISE FL 33313**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-1113470**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name

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

City

**FL**

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:  
 FEE IS \$61.25**

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00 May Be  
 Added to Fees**

**Make Check Payable to  
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P WOLFSON, AARON D 9920 NW 11TH ST PLANTATION FL 33322</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP SINIAWSKY, JEFFREY 1401 NW 100 WAY PLANTATION FL 33322</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T BERGMAN, AMI 9790 NW 17TH ST. PLANTATION FL</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D DRUSS, LEWIS 9421 SEA TURTLE MANOR PLANTATION FL</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D DEICH, CHARLES 7380 NW 54TH COURT LAUDERHILL FL</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S KRIMSKY, BETH-ANN 12341 NW 9 ST PLANTATION FL 33325</b>	<input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PRESIDENT IVOR BAMBERGER 421 Holly Lane Plantation, FL 33317</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VICE PRESIDENT LEON HELLER 7360 SW 6 Street Plantation, FL 33317</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SECRETARY/TREASURER IRVING GOODMAN 1528 Whitehall Dr. #205 Ft. Lauderdale, FL 33324</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>HY SCHWARTZ - D 7100 W. Oakland Park Blvd. Sunrise FL 33313</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SHELDON KING - D 7100 W. Oakland Park Blvd. Sunrise, FL 33313</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TERRY WAIT - D 7100 W. Oakland Park Blvd. Sunrise, FL 33313</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*LEON HELLER*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/12/01**  
 Date

**742-3779**  
**742-4060**  
 Daytime Phone #

CR2E037 (10/00)