## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 27, 2007 8:00 am Secretary of State 03-27-2007 90001 032 \*\*\*\*61.25

ANNUAL REPORT	

**DOCUMENT #713215** LAUDERHILL MALL MERCHANTS ASSOCIATION, INC. 40022007 Principal Place of Business Mailing Address 1267 NW 40 AVE 1267 NW 40 AVE LAUDERHILL, FL 33313 LAUDERHILL, FL 33313 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01172007 Chg-NP CR2E037 (12/06) 4. FEI Number 59-1166592 City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WEINTRAUB, SAMUEL 0. Box Number is Not Acceptable)
5 NW Corporate 7760 W 20 AVE STE 1 HIALEAH, FL 33016 8. The above named entity submits this statement ler the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2007 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. TITLE PD ☐ Delete TITLE Change ☐ Addition ROZENCWAIG, ISRAEL NAME NAME STREET ADDRESS 1355A NW 40TH AVENUE STREET ADDRESS CITY-ST-ZIP LAUDERHILL, FL CITY-ST-ZIP TD ☐ Delete ☐ Change ☐ Addition TITLE SULTAN, LLOYD NAME NAME STREET ADDRESS 1310/12 NW 40TH AVENUE STREET ADDRESS CITY-ST-ZIP LAUDERHILL, FL CITY-ST-ZIP Delete Change Addition TITLE BAKER, CYNTHIA G. NAME NAME STREET ADDRESS 1267 NW 40TH AVE STREET ADDRESS CITY-ST-ZIP LAUDERHILL, FL CITY-ST-ZIP ☐ Change TITS F ☐ Delete TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7iP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the received 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. Srael Rozencwaig SIGNATURE: