FILE NOW: FILING FEE IS \$61.25



Sandra B. Mortham

COF	DNPROFIT RPORATION JAL REPORT 1998	DIVISIO	DEPARTMENT OF STATE sidera B. Mortham secretary of State N OF CORPORATIONS	May 08 1998 8:00am Secretary of State
POCUI	MENT # 714;	303 (5)		
CONGF	REGATION AGUDATH	ACHIM, INC.		I IDDING MARRI (AND SHARE (AND BRICE IN SHARE) AND SHARE SHARE
	a dD			
Principal Place of Business Mailing Address				
19255 N.E. 3RD AVE. 19255 N.E. 3RD AVE. NO. MIAMI BEACH FL 33179 NO. MIAMI BEACH FL 33179				3. Date Incorporated or Qualified 03/25/1968
1				4. FEI Number Applied For
2 Principal P	lace of Business	2e. Mailing Addres		23-7371662 Not Applicable
21	lace of business	26 Mailing Address	38	Certificate of Status Desired SB.75 Additional Fee Required
Suite, Apt	#, etc.	Suite, Apt. #, e	tc.	Election Campaign Financing \$5.00 May Be
City & State		27 City & State	<u> </u>	Trust Fund Contribution Added to Fees
23	·	28		7. Is this nonprofit corporation a homeowners association?
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	9. Name and Address of	29 Current Registered Agent	[30]	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
SOBEL, PHILIP 20120 NE 2ND AVE. NORTH MIAMI FL 33179 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 FL 85 Zip Code				
11. Pursuant office or r agent. I a	to the provisions of Sections 6 egistered agent, or both, in the m familiar with, and accept the	e obligations of, Section 617.08	Statutes, the above-name was authorized by the c 503, Florida Statutes. Philip Sobel	ed corporation submits this statement for the purpose of changing its registered or
SIGNATURE .	Signature, typed or printed name of regis		(NOTE: Registered Agent signal	
12.	OFFICE	RS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	MALER, JOSZEF	L] DELI	1.1 TITLE 1.2 NAME	☐ Change ☐ Addition
STREET ADORESS	125 NW 197TH ST.		1.3 STREET ADDRES	s
CITY-ST-ZIP	MIAMI FL 33179		1.4 City-St-zip	
TITLE	P	☐ DELC		Change Addition
NAME STREET ADDRESS	Sobel, Philip 20120 Ne 2ND AVE.		2.2 NAME 2.3 STREET ADDRES	s
CITY-ST-ZIP	N. MIAMI FL 33179		2. 4 CITY-ST-ZIP	`
TITLE	Ť	DELI		T Change Addition
NAME	ZELLNER, RUTH		3.2 NAME	Zellner, Ruth 13155 S.W. 7 Ct.
STREET ADDRESS	245 NE 191 ST.		3.3 STREET ADDRES 3.4. CITY-ST-ZIP	Pembroke Pines, FL 33027
CITY-S1-ZIP TITLE	N. MIAMI FL 33179 T	☐ DELC		Change Addition
NAME	MALER, ELAINE		4. 2 NAME	
STREET ADDRESS	125 NW 197TH ST.		4.3 STREET ADDRES	s [
CITY-ST-ZIP	MIAMI FL 33169	DELE	4.4 CITY - ST - ZIP	Change Addition
TITLE NAME		L) DER	5.1 TITLE 5.2 NAME	Li Change Li Addition
STREET ADORESS			5.3 STREET ADDRES	s
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		DELI		Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRES	s

14. Thereby 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 attechment with an address.

SIGNATURE:

Phillip Sobel

FILED