

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Dec 01, 2006
Secretary of State

DOCUMENT# 720613

Entity Name: PAVILION HEBREW STUDY GROUP, INC.**Current Principal Place of Business:**5601 COLLINS AVE
CU 9
MIAMI BEACH, FL 33140 US**New Principal Place of Business:****Current Mailing Address:**5601 COLLINS AVE
CU 9
MIAMI BEACH, FL 33140 US**New Mailing Address:****FEI Number:** 23-7209629**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**FRIENDS OF LUBAVITCH OF FLORIDA
17330 NW 7 TH AVE
MIAMI, FL 33169 US**Name and Address of New Registered Agent:**KIVETZ, HARRY
1151 SW 128TH TERR.
APT. D 414
PEMBROOK PINES, FL 33027 US

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: HARRY KIVETZ

12/01/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: KORF, CHANA
Address: 6100 PINE TREE DR
City-St-Zip: MIAMI BEACH, FL 33140

Title: PD () Delete
Name: KORF, BENZION RABBI
Address: 6100 PINE TREE DR
City-St-Zip: MIAMI BEACH, FL 33140

Title: T () Delete
Name: KORF, RIVKA
Address: 1257 ALTON RD
City-St-Zip: MIAMI BEACH, FL 33139

Title: VPD () Delete
Name: KORF, ABRAHAM RABBI
Address: 1257 ALTON RD
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: CASS, MENACHEM RABBI
Address: 6100 PINE TREE DR
City-St-Zip: MIAMI BEACH, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: ROSS, HELENE
Address: 5750 COLLINS AVE.
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: PD (X) Change () Addition
Name: ROSEN, BENJAMIN
Address: 5600 COLLINS AVE
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: S (X) Change () Addition
Name: KIVETZ, HARRY
Address: 1151 SW 128TH TERR.
City-St-Zip: PEMBROKE PINES, FL 33027 US

Title: VPD (X) Change () Addition
Name: PENER, BERNARD
Address: 5701 COLLINS AVE.
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: D (X) Change () Addition
Name: FREEMAN, SAMUEL
Address: 5701 COLLINS AVE.
City-St-Zip: MIAMI BEACH, FL 33140 US

I hereby certify that the information supplied with this filing does not qualify for the 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: HELENE ROSS

T

12/01/2006

Electronic Signature of Signing Officer or Director

Date