


# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 22, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 721865</b> 1. Entity Name PEACE FOR ISRAEL, INC.	
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Principal Place of Business % BEVERLY HOHL 7520 FILLMORE STREET HOLLYWOOD, FL 33024	Mailing Address PO BOX 840005 PEMBROKE PINES, FL 33084
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DO NOT WRITE IN THIS SPACE



01072004 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-1364159	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

5. Name and Address of Current Registered Agent

HEINTZ, JACK  
11480 SW 22 CT  
DAVIE, FL 33325

DO NOT WRITE  
IN THIS SPACE

6. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when remodeling) \_\_\_\_\_ DATE \_\_\_\_\_

<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2004</b>	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD HEINTZ, JACK 11480 SW 22ND COURT DAVIE, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD HOHL, BEVERLY 7520 FILLMORE ST HOLLYWOOD, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD TUCKER, BERNIE 4328 SO. KIRKMAN RD. #1309 ORLANDO, FL 32811
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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000000094178  
03/22/04-80049-006 61.25

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:** Beverly Hohl Beverly Hohl 3/18/04 954-981-8922

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR