

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 724704

1. Entity Name

B'NAI ISRAEL & GREATER MIAMI YOUTH SYNAGOGUE INC

Principal Place of Business

16260 SW 288 ST
HOMESTEAD FL 33030

Mailing Address

PO BOX 1019
SANIBEL FL 33957-1019

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GOLD, MARTIN
8625 SOUTHWEST 44TH STREET
MIAMI FL 33155

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME FOX, DR. M. S.
STREET ADDRESS 235 SOLANO PRADO
CITY-ST-ZIP CORAL GABLES FL ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD
NAME URLICH, SYLVIA
STREET ADDRESS 2500 SW 75TH AVE
CITY-ST-ZIP MIAMI BEACH FL ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD
NAME GOLD, LAWRENCE
STREET ADDRESS 3501 SW 117 COURT
CITY-ST-ZIP MIAMI FL ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD
NAME GOLD, MARTIN
STREET ADDRESS 1722 SERENITY LANE
CITY-ST-ZIP SANIBEL FL 33957 ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S
NAME GOLD, REBECA
STREET ADDRESS 8625 SW 44 STREET
CITY-ST-ZIP MIAMI FL ☐ Delete

TITLE ☒ Change ☐ Addition
NAME REBECA GOLD
STREET ADDRESS 1722 SERENITY LANE
CITY-ST-ZIP SANIBEL FL 33957

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: *Rebecca Gold* REBECA GOLD, SECRETARY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/31/01

Daytime Phone #

941-395-2691

FILED
Apr 03, 2001 8:00 am
Secretary of State

04-03-2001 90111 035 ****61.25



DO NOT WRITE IN THIS SPACE

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