

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 727369

1. Entity Name

TEMPLE SAMU-EL OR OLOM, INC.

Principal Place of Business

9353 S.W. 152 AVE.
MIAMI FL 33196

Mailing Address

9353 S.W. 152 AVE.
MIAMI FL 33196

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

23-7346131

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LEVINE, MARTIN E
8900 SW 107 AVE
SUITE 208
MIAMI FL 33176-1451

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 NAME ☐ Delete
D SCHLACHTMAN, MICHAEL
STREET ADDRESS 13135 SW 107 ST
CITY-ST-ZIP MIAMI FL 33186

TITLE NAME ☐ Change ☐ Addition
NAME → Schlachtmann, Michael
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
PD HORNICK, LINDA
STREET ADDRESS 8520 SW 12TH ST
CITY-ST-ZIP MIAMI FL 33144

TITLE NAME ☐ Change ☐ Addition
NAME → Hornik, Linda
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
TD SILVERMAN, SAUL
STREET ADDRESS 8430 SW 170 TERR
CITY-ST-ZIP MIAMI FL 33157

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

TITLE NAME ☐ Delete
FSD LANN, LEM
STREET ADDRESS 8573 SW 144 CT
CITY-ST-ZIP MIAMI FL 33183

TITLE NAME ☐ Change ☐ Addition
NAME → Lanny, Leon
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
ATD SLOTNICK, MICHAEL
STREET ADDRESS 10340 SW 96 TERRACE
CITY-ST-ZIP MIAMI FL 33176

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

TITLE NAME ☐ Delete
EVPD BACKER, MICHAEL
STREET ADDRESS 10502 SOUTHWEST 143RD COURT
CITY-ST-ZIP MIAMI FL 33186

TITLE NAME ☐ 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 I/we empowered.

SIGNATURE:

Linda Hornick

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
May 02, 2002 8:00 am
Secretary of State

05-02-2002 90024 025 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)