

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727369

FILED
Jul 12, 2006
Secretary of State

Entity Name: TEMPLE SAMU-EL OR OLOM, INC.

Current Principal Place of Business:

10680 SW 113 PL
MIAMI, FL 33176

New Principal Place of Business:

Current Mailing Address:

10680 SW 113 PL
MIAMI, FL 33176

New Mailing Address:

FEI Number: 23-7346131 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

LEVINE, MARTIN E
8900 SW 107 AVE
SUITE 206
MIAMI, FL 331761451 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SHLACHTMAN, MICHAEL
Address: 13135 SW 107 ST
City-St-Zip: MIAMI, FL 33186

Title: SD () Delete
Name: ABRAMOFF, FRANCINE
Address: 9850 SW 118 PLACE
City-St-Zip: MIAMI, FL 33186

Title: TD () Delete
Name: ROSENBLOOM, HOWARD
Address: 7901 SW 147 COURT
City-St-Zip: MIAMI, FL 33193

Title: VD () Delete
Name: TOBOLOWSKY, DAVID
Address: 9601 SW 123 AVENUE
City-St-Zip: MIAMI, FL 33186

Title: PD () Delete
Name: SLOTNICK, MICHAEL
Address: 10340 SW 96 TERRACE
City-St-Zip: MIAMI, FL 33176

Title: D () Delete
Name: BACKER, MICHAEL
Address: 10502 SOUTHWEST 143RD COURT
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MICHAEL C. SLOTNICK

PD

07/12/2006

Electronic Signature of Signing Officer or Director

Date