## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 727966

(4)

## SOUTH FLORIDA CONFERENCE ON SOVIET JEWRY, INC.

Principal Place of Business		Mailing Address		- T EMBINI (MAKID HANN EMBIN IRNIN DININ DINI DIRAH ELIKUN DININI DININI DININI DININI DININI DININI	
10691 N KENDA	all DR	10691 N. KENDALL DR.	*		
#309		309			
MIAMI FL 33176	3	MIAMI FL 33176-1551		3. Date incorporated or Qualified	3a. Date of Last Report
US		US		11/07/1973	03/27/1996
	ace of Business	2a. Maiting Address		4. FEI Number	Applied For
21		26		59-1610349	Not Applicable
Suite, Apt. 6	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional Fee Required
City & State	>	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zıp	Country	8. This corporation has liability for	
24	25	29	30		Yes No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Re	gistered Agent
			81 Name		
CANTOR	, HINDA		82 Street Add	dress (P.O. Box Number is Not Acceptat	ole)
8640 S.V	V. 94TH ST.				
miami fi	L 33156		83		
			84 City		85 Zip Code
11. Pursuant t	to the provisions of Sections 617.050	02 and 617.1508, Florida Statu	ites, the above-named co	rporation submits this statement for the pation's board of directors. I hereby accept	ourpose of changing its registered
agent. I ar	m familiar with, and accept the oblig	ations of Section 617.0503, F	lorida Statutes.	and to board of directors. Thorough about	of the appointment as to Broke or
SIGNATURE					
	Signature, typed or printed name of registered ag		TE: Registered Agent signature req		DATE
12.		ID DIRECTORS  DELETE	13.	ADDITIONS/CHANGES TO OFFIC	Change Addition
	ST PROVAN HIDITU	C) perese	1.1 IIILE 1.2 NAME		C Charge C Monton
NAME	Brown, Judith 7925 SW 135 ST.				
STREET ADDRESS	MIAMI FL		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	PD PD	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME	CANTOR, HINDA		2.2 NAME		
STREET ADDRESS	8640 S.W. 94TH ST.		2.3 STREET ADDRESS	y reg sales	
CITY-ST-ZIP	MIAMI, FL 00000		2. 4 CITY-ST-ZIP	·	
TITLE	VD	DELETE	3.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME	CANTOR, SANDRA	<del></del>	3.2 NAME		•
STREET ADDRESS	11220 S.W. 71 AVE.		3.3 STREET ADDRESS	• •	
CITY-ST-ZIP	MIAMI FL		3.4. CITY-ST-ZIP		
TITLE	VD	DELETE	4.1 TITLE		Change Addition
NAME	ABELS, JACKIE		4. 2 NAME	•	
STREET ADDRESS	14600 SW 74 CT		4.3 STREET ADORESS		•
CITY-ST-ZIP	MIAMI FL		4.4 CITY-ST-ZIP	•	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
				ed in Section 119.07(3)(i), Florida Statute at my signature shall have the same lega	- 1 - 41 1 1
I am an of	fficer or director of the corporation of	or the receiver or trustee empo	wered to execute this rep	nat my signature shall have the same lega ort as required by Chapter 617, Florida S	Statutes; and that my name
appears in	n Block 12 or Block 13 if phanged, o	or on an attachment with an ac	ddress.		395-279-

**SIGNATURE** 

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

Date 2/1

Daytime Phone # 0033071

**FILED** 

Feb 18 1997 8:00am

Secretary of State