

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728527

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: TEMPLE B'NAI ZION, INC.

**Current Principal Place of Business:**

200-178TH ST.  
MIAMI BEACH, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

200-178TH ST.  
MIAMI BEACH, FL 33160

**New Mailing Address:**

FEI Number: 59-1522574      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SIMONA, MISHAAN  
2600 ISLAND BOULEVARD  
1005  
AVENTURA, FL 33180 US

**Name and Address of New Registered Agent:**

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: PR ( ) Delete  
Name: LANKRY, AARON  
Address: 20016 N.E. 36 PLACE  
City-St-Zip: AVENTURA, FL 33180

Title: 1VPD ( ) Delete  
Name: ADAR, AMRAM  
Address: 18851 N.E. 29TH AVENUE 7TH FLOOR  
City-St-Zip: AVENTURA, FL 33180

Title: SEC ( ) Delete  
Name: BITTON, URIEL  
Address: 73-12 193RD STREET  
City-St-Zip: FRESH MEADOWS, NY 11366

Title: TD ( ) Delete  
Name: BODNER, MEIR  
Address: 868 E. 24TH STREET  
City-St-Zip: BROOKLYN, NY 11210

**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:

I hereby certify that the information supplied with this filing does not qualify 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: AARON LANKRY

PR

04/30/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date