

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 730148

1. Entity Name

B'NAI SEPHARDIM SHAARE SHALOM OF HOLLYWOOD, INC.

**FILED**  
Feb 28, 2002 8:00 am  
Secretary of State

02-28-2002 90065 047 \*\*\*\*61.25

0029532

Principal Place of Business

3670 STIRLING ROAD  
FT. LAUDERDALE FL 33312

Mailing Address

3670 STIRLING ROAD  
FT. LAUDERDALE FL 33312

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 23-7420141

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

ALCHEK, FRED  
1524 N.W. 182ND AVENUE  
PEMBROKE PINES FL 33029

7. Name and Address of New Registered Agent

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

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BEN-HORIN, YEHUDA	
STREET ADDRESS	3670 STIRLING ROAD	
CITY-ST-ZIP	FORT LAUDERDALE FL 33312	
TITLE	DVD	<input type="checkbox"/> Delete
NAME	BENZRIHEM, PROSPER	
STREET ADDRESS	3670 STIRLING ROAD	
CITY-ST-ZIP	FORT LAUDERDALE FL 33312	
TITLE	DS	<input type="checkbox"/> Delete
NAME	MATALON, VICTOR	
STREET ADDRESS	3670 STIRLING ROAD	
CITY-ST-ZIP	FORT LAUDERDALE FL 33312	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	SETTON, MENASHE	
STREET ADDRESS	3670 STIRLING ROAD	
CITY-ST-ZIP	FORT LAUDERDALE FL 33312	
TITLE	VS	<input checked="" type="checkbox"/> Delete
NAME	ANIDJAR, ISAAC	
STREET ADDRESS	3670 STIRLING ROAD	
CITY-ST-ZIP	FORT LAUDERDALE FL 33312	
TITLE	VT	<input type="checkbox"/> Delete
NAME	LEVY, LEON	
STREET ADDRESS	3670 STIRLING ROAD	
CITY-ST-ZIP	FORT LAUDERDALE FL 33312	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PROSPER BENZRIHEM PROSPER	
STREET ADDRESS	3670 STIRLING ROAD	
CITY-ST-ZIP	FORT LAUDERDALE FL 33312	
TITLE	DVD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEON LEVY LEON	
STREET ADDRESS	3670 STIRLING ROAD	
CITY-ST-ZIP	FORT LAUDERDALE FL 33312	
TITLE	DS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MATALON, VICTOR	
STREET ADDRESS	3670 STIRLING ROAD	
CITY-ST-ZIP	FORT LAUDERDALE FL 33312	
TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEVY STEVEN	
STREET ADDRESS	3670 STIRLING ROAD	
CITY-ST-ZIP	FORT LAUDERDALE FL 33312	
TITLE	BVS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AFRIAT ELIE	
STREET ADDRESS	3670 STIRLING ROAD	
CITY-ST-ZIP	FORT LAUDERDALE FL 33312	
TITLE	VT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SAMUEL ANIDJAR SAMUEL	
STREET ADDRESS	3670 STIRLING ROAD	
CITY-ST-ZIP	FORT LAUDERDALE FL 33312	

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:

*PROSPER BENZRIHEM*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-31-02 (954) 983 9981

CR2E037 (9/01)