

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730148

FILED
Apr 24, 2009
Secretary of State

Entity Name: B'NAI SEPHARDIM SHAARE SHALOM OF HOLLYWOOD, INC.

Current Principal Place of Business:

3670 STIRLING ROAD
FT. LAUDERDALE, FL 33312

New Principal Place of Business:

Current Mailing Address:

3670 STIRLING ROAD
FT. LAUDERDALE, FL 33312

New Mailing Address:

FEI Number: 23-7420141

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALCHEK, FRED
1524 N.W. 182ND AVENUE
PEMBROKE PINES, FL 33029 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: PD () Delete
Name: ANIDJAR, SAMUEL
Address: 3670 STIRLING RD
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: VPD () Delete
Name: LEVY, STEVE Z
Address: 3670 STIRLING RD
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: T () Delete
Name: ANIDJAR, ISAAC
Address: 3670 STIRLING RD
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: S () Delete
Name: AFRIAT, ELIE
Address: 3670 STIRLING RD
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: VT () Delete
Name: LEVY, LEON
Address: 3670 STIRLING RD
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: VS () Delete
Name: MATALON, VICTOR
Address: 3670 STIRLING RD
City-St-Zip: FORT LAUDERDALE, FL 33312

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 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: STEVE LEVY

MR

04/24/2009

Electronic Signature of Signing Officer or Director

Date