2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2005
Secretary of State

DOCUMENT# 730616

Entity Name: TALMUDIC COLLEGE OF FLORIDA, INC.

Current Principal Place of Business:

1910 ALTON RD
MIAMI BEACH, FL 33139 US

New Principal Place of Business:

Current Mailing Address:

1910 ALTON ROAD
MIAMI BEACH, FL 33139 US

New Mailing Address:

FEI Number: 59-1571122 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HILL, IRA
1910 ALTON RD
MIAMI BCH, FL 33139 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: VDT ( ) Delete
Name: ZWEIG,RABBI YOCHANAN,
Address: 2035 N. BAY RD.
City-St-Zip: MIAMI BEACH, FL

Title: PDT ( ) Delete
Name: ZWEIG, YITZCHAK
Address: 2033 N BAY RD
City-St-Zip: MIAMI BCH, FL

Title: SD ( ) Delete
Name: SIMON, MILTON RABBI
Address: 1910 ALTON RD
City-St-Zip: MIAMI BEACH, FL

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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: RABBI MILTON SIMON SD 04/19/2005

Electronic Signature of Signing Officer or Director — Date