730616

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

100438440581

919 03-7

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11-036

FILED

SEP 5 9 37 AM '74

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TALMUDIC COLLEGE OF FLORIDA, INC.

Martin Genet
N. Miami Beach

9-4-74

Ch# 730616

cc
file
9-6-74

GENET & GENET
ATTORNEYS AT LAW
1140 N. E. 163RD STREET
N. MIAMI BEACH, FLORIDA 33162

PHONE: (305) 944-2839

MARTIN GENET
SANDOR FICLO GENET

August

SEP -3-74 02 96600 *****3.00
SEP -3-74 02 96500 ****10.00
SEP -3-74 02 96400 ****15.00
SEP -3-74 02 96300 ****30.00

August 29, 2974

Secretary of State
The Capitol
Tallahassee, Florida 32304

Att: Corporate Division

Re: TALMUDIC COLLEGE OF FLORIDA, INC.,
A Non-Profit Corporation

FILED
SEP 5 9 37 AM '74
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dear Sir:

Enclosed please find original and one copy of the Articles of Incorporation and Certificate designating Resident Agent together with our check in the amount of $ 58.00 to cover cost of filing same.

Please endorse your approval of the Articles of Incorporation and return a certified copy to my office.

Very truly yours,

Martin Genet

MARTIN GENET

MG:lrv

Enc.

C. TAX 50
FILING 5.
R. AGENT FEE 3.
C. COPY 5
TOTAL 58
N. NAME
DIS
20
77.30

PRIVILEGE TAX
C. TAX 30
FILING 15
C. COPY 10
R. A. FEE 3
P. COPY
SEARCH
TOTAL 58
BALANCE DUE
REFUND

Secretary of State

STATE OF FLORIDA
THE CAPITOL
TALLAHASSEE 32304

Dorothy W. Glisson
SECRETARY OF STATE

904/488-6160
(TWX) 810/851-9677
Please refer to this number for future correspondence regarding this corporation

730616
September 6, 1974

MARTIN GEIGER
1140 N.E. 163rd St.
N.Miami Beach, Fla. 33162

Subject: TALMUDIC COLLEGE OF FLORIDA, INC.

A refund for $20. is enclosed for the reason checked:

1. _____ Withdrawal of charter.
2. __x__ Overpayment of filing fee.
3. _____ Charter not of record in this office.
4. _____ Overpayment of certification fee.
5. _____ Filing fee previously paid.
6. _____ No fee required.
7. _____ No response to our letter of _____.
8. _____ Overpayment of charter tax.
9. _____ Comments:

If you have any questions regarding this matter, please let us know.

corp-77

REQUISITION FOR REFUND

This money was originally received per validator stamp as follows:

9/3/74	96300	2	5	$30.00
Date	Validation No.	Machine No.	Dept. No.	Amount

Requested by: _____
Authorized Signature

til

For use by Fiscal Department

Paid by Revolving Fund Check No. _____

gen-1

dated _____ amount _____

1-7-74

ARTICLES OF INCORPORATION

OF

TALMUDIC COLLEGE OF FLORIDA, INC.

A Non-Profit Corporation

We, the undersigned, do hereby unite and associate ourselves for the purpose of forming a corporation under the laws of the State of Florida, not for profit, by and under the provisions of the Statutes of the State of Florida, providing for the formation, rights, privileges, immunities and liabilities of a corporation, not for profit, and for such purpose do hereby make, execute and adopt the following Articles of Incorporation.

FILED

SEP 5 8 37 AM '74

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - NAME

The name of this corporation shall be TALMUDIC COLLEGE OF FLORIDA, INC.

ARTICLE II - PURPOSES

The general nature of the objects and purposes of this corporation shall be:

Section 1: To own and operate a school or schools of higher Jewish religious learning within the State of Florida for instructional and educational purposes.

Section 2: To publish, sell, distribute pamphlets and books and literature of an educational or instructional nature and of a type to be used in the schools and to own and operate printing facilities in connection therewith.

Section 3: To accept donations, gifts, legacies and bequests.

ARTICLE III - QUALIFICATION OF MEMBERS

Every person who believes in the principles of our religion, strict adherence to the laws of the State of Florida and of the United States of America and the aims of this organization is qualified and eligible for membership in this corporation. New Members shall be admitted into this organization in accordance with the by-laws to be enacted after a Charter has been granted.

ARTICLE IV - TERM OF EXISTENCE

This corporation shall have perpetual existence.

ARTICLE V - SUBSCRIBERS

The names and residences of the subscribers to these Articles are:

NAME	RESIDENCE
RABBI MILTON SIMON	3776 Prairie Avenue, Miami Beach, Florida
ROBERT M. ENTIN	3711 Chase Avenue, Miami Beach, Florida
RABBI YOCHANAN ZWEIG	3791 Royal Palm Avenue, Miami Beach, Florida

ARTICLE VI - OFFICERS

The business affairs of this corporation shall be managed by a Board of Directors, such management to be subject to the approval of the members, and said Board of Directors to be composed of not less than three and shall be elected from and by the membership of said corporation. The Rosh Yeshiva may appoint up to one-third of the Board of Directors from the professional staff employed by said corporation.

The term of membership of the Board of Directors shall be for a period of one year. The said Board of Directors shall appoint from its own membership, a Chairman. All elections to membership on said Board of Directors shall be by a majority vote of the members of said corporation at any business meeting of said corporation. The present Board of Directors shall consist of all persons as enumerated in Article VII.

In addition to said Board of Directors, said corporation shall have a President, Vice-President, Secretary and Treasurer, and such other officers as may be necessary, and such officers, except for the President, shall be elected by a majority vote of the members of the corporation present at any business meeting of said corporation for such term as the corporation may provide by its by-laws. The Rosh Yeshiva shall be the President. The names of the persons who are to serve as officers of the corporation until the first meeting of the Board of Directors are:

OFFICE	NAME
President	RABBI YOCHANAN ZWEIG
Vice President-Treasurer	ROBERT M. ENTIN
Secretary	RABBI MILTON SIMON

The Board of Directors shall have authority over the financing, administration, purchase, sale and lease of property. The Rosh Yeshiva shall have the full and final authority over all other matters including therein the

religious training and educational policy of said school and that the Rosh Yeshiva shall have veto power over any and all action of said Board of Directors as well as the membership.

The Rosh Yeshiva cannot be removed and/or discharged from such office involuntarily and is to remain as Rosh Yeshiva until he retires, becomes incapacitated, or until his death. The Rosh Yeshiva has the authority and right to select and appoint his successor. RABBI YOCHANAN ZWEIG is the Rosh Yeshiva.

ARTICLE VII - BOARD OF DIRECTORS

The names and residences of the persons who are to serve as Directors for the ensuing year, or until the first annual meeting of the corporation are:

NAME	RESIDENCE
RABBI MILTON SIMON	3776 Prairie Avenue, Miami Beach, Florida
ROBERT M. ENTIN	3711 Chase Avenue, Miami Beach, Florida
RABBI YOCHANAN ZWEIG	3791 Royal Palm Avenue, Miami Beach, Florida

ARTICLE VIII - BY LAWS

The Board of Directors of this corporation may provide such by-laws for the conduct of its business and the carrying out of its purposes as they may deem necessary from time to time.

Upon proper notice, the by-laws may be amended, altered or rescinded by a majority vote of those members of the Board of Directors present at any regular meeting or any special meeting called for that purpose except the Rosh Yeshiva shall have complete control over the educational operation of this institution. No amendment to the Articles of Incorporation or by-laws or resolution of this corporation shall be effective unless they have the written consent and approval of the said Rosh Yeshiva.

ARTICLE IX - AMENDMENTS

These articles of incorporation may be amended by a majority vote of the Board of Directors present and a majority vote of the corporation members present at that meeting. However, the Rosh Yeshiva shall have veto power over same.

ARTICLE X - LOCATION

The location of this corporation shall be in the City of Miami Beach, County of Dade, State of Florida.

ARTICLE XI - COMPENSATION

No officer or director shall receive any compensation for acting in such capacity. However, except that reasonable compensation may be paid for services rendred to or for the corporation affecting one or more of its purposes.

ARTICLE XII - DISTRIBUTION OF ASSETS UPON DISSOLUTION

No person, firm or corporation shall ever receive any dividends or profits from the undertaking of this corporation and upon dissolution of this organization all of its assets remaining after payment of all costs and expenses of such dissolution shall be distributed to schools of this type at the discretion of the Board of Directors, and are qualified under Section 501 (c)(3) of the Internal Revenue Code.

IN WITNESS WHEREOF we, the undersigned subscribing incorporators, have hereunto set our hands and seals this 28 day of August, 1974, for the purpose of forming this corporation, not for profit, under the laws of the State of Florida.

RABBI MILTON SIMON

ROBERT M. ENTIN

RABBI YOCHANAN ZWEIG

STATE OF FLORIDA)
COUNTY OF DADE)

BEFORE ME, a Notary Public duly authorized in the State and County named above to take acknowledgements, personally appeared RABBI MILTON SIMON, ROBERT M. ENTIN, and RABBI YOCHANAN ZWEIG, to me known to be the persons described as subscribers in and who executed the foregoing Articles of Incorporation, and they acknowledged before me that they executed and subscribed to these Articles of Incorporation.

WITNESS my hand and seal in the County and State named above this 28 day of August, 1974.

NOTARY PUBLIC

My Commission Expires: NOTARY PUBLIC STATE OF FLORIDA AT LARGE
MY COMMISSION EXPIRES MAY 5, 1976
BONDED THRU GENERAL INSURANCE UNDERWRITERS

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In pursuance of Chapter 48.091, Florida Statutes, the following is submitted, in compliance with said act:

First--That TALMUDIC COLLEGE OF FLORIDA, INC., a non-profit corporation, desiring to organize under the laws of the State of Florida with its principal office, as indicated in the Certificate of Incorporation at City of Miami Beach County of Dade, State of Florida, has named MARTIN GENET, located at 1140 N. E. 163rd Street, North Miami Beach, Florida 33162

as its agent to accept service of process within this state.

Having been named to accept service of process of the above stated corporation, at place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.

Martin Genet

MARTIN GENET

534-7050

בס"ד

בית מדרש הגדול

TALMUDIC COLLEGE OF FLORIDA

4014 CHASE AVENUE, MIAMI BEACH, FLORIDA 33140

RE: Talmudic College of Florida, Inc.
730616

March 7, 1977 - 71369 ***$15.00

Secretary of State
1977 Annual Reports
Divisions of Corporations
The Capitol
Tallahassee, Fla. 32304
F.R. Ritter Division Director

DISSOLVED INVOLUNTARILY
pursuant to Chapter 607.271 (2)(a), F.S.
9/3/76
Reinstated 3/5/77

Dear Sir:

We are enclosing an additional fee of $15.00 for reinstatement.

REINSTATEMENT
Fee in lieu of CST
Reinstatement Filing Fee 15
72 Privilege Tax
73 Annual Report
74 Annual Report
75 Annual Report 5
76 Annual Report 5
77 Annual Report 5
Total 30
Bal. Due
Refund

Sincerely,

Rabbi J. Burstyn
Executive Director

TAH 3.9.77

FILED
MAR 9 9 56 AM 1977
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

730616

SEE IMPORTANT DISSOLUTION NOTICE ON OTHER SIDE

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

CORPORATION ANNUAL REPORT

1977

THIS REPORT MUST BE ACCOMPANIED BY A $5 FEE.

Bruce A. Smathers
Secretary of State

Form COR 620

FILED 1977 MAR 9 9 09 AM
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

▶ READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES ◀

1. Name and Address of Corporation Principal Office:

730616

Talmudic College of Florida
4014 Chase Avenue
Miami Beach, Fla. 33140

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City MAR 11 18 71800 ****15.00

State Zip Code

3. Date Incorporated or Qualified To Do Business in Florida	4. Federal Employer Identification Number (FEIN)	5. Date of Last Report
Aug . 1974	59-1571122	

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Director (x)	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
Rabbi Yochanan Zweig	Pres		3791 Royal Palm Ave.	Miami Beach, Fla. 33140
Robert Entin	V. Pres		3711 Chase Avenue	Miami Beach, Fla. 33140
Milton Simon	Sec.		2850 Prairie Avenue	Miami Beach, Fla. 33140

7. Registered Agent Information

Name: Daniel Retter
Street Address (Do NOT Use P.O. Box Number): 101 East Flagler Street
City, State and Zip Code: Miami, Fla. 33131

If you wish to change Registered Agent on this form, enter all new information here ▶

Name
Street Address (Do NOT Use P.O. Box Number)
City, State and Zip Code

8. An officer of the Corporation must sign this report. This report must be signed by one of the following: The President, Vice President, Secretary, Assistant Secretary or Treasurer or if the Corporation is in the hands of a receiver or trustee, shall be executed on behalf of the Corporation by the receiver or trustee.

No Other Titles Will Be Accepted, Your Report Will Be Returned If It Does NOT Bear An Authorized Signature.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.

[redacted]

Typed Name of Signing Officer	Title	Telephone Number
Milton Simon	Secretary	534-7050
Signature: Milton Simon		Date: February 23, 1977

THIS REPORT MUST BE ACCOMPANIED BY THE $5 FEE

Secretary of State

STATE OF FLORIDA
THE CAPITOL
TALLAHASSEE 32304

BRUCE A. SMATHERS
SECRETARY OF STATE

DAVID C. MACNAMARA
ASSISTANT SECRETARY OF STATE

F. R. RITTER
DIRECTOR
DIVISION OF CORPORATIONS

Telephone: 904/488-3140

Talmudic College of Florida
4014 Chase Avenue
Miami Beach, Florida 33140

SUBJECT: TALMUDIC COLLEGE OF FLORIDA

Charter Number: 730616

This will acknowledge receipt of the following:

1. _X_ Check in the amount of $ 30.00.
2. _____ Articles of Incorporation.
3. _____ Amendment to Articles of Incorporation files;
4. _____ Articles of Merger or Consolidation filed.
5. _____ Certificate of Withdrawal filed.
6. _____ Limited Partnership filed.
7. _____ Trademark Application filed.
8. _____ Application for qualification filed _____. It is no longer required to issue a permit. A certificate under seal to this effect may be obtained for $5.
9. _X_ Reinstatement filed. March 9, 1977.
10. _____ Dissolution filed.
11. _____ OTHER:

ENCLOSED:

1. _____ Certified Copy(ies).
2. _____ Certificate(s) Under Seal.
3. _____ Photocopy(ies).
4. _____ OTHER:

145

CORP - 100
11/22/76

730616

AMENDMENT NON PROFIT

TALMUDIC COLLEGE OF FLORIDA, INC.

amending articles of incorporation

APR 18-77 02 699000 *****5.00
APR 18-77 UPDATED *****15.00
DATE - 4-14-77

FILED: 4-8-77

CHARTER: 730616

M

C. TAX	
FILING	15.00
R. AGENT	
C. COPY	5.00
TOTAL	20.00
N. BANK	
BALANCE DUE	
REFUND	
PHOTO COPY	

CERTIFIED COPY SENT

Secretary of State

STATE OF FLORIDA
THE CAPITOL
TALLAHASSEE 32304

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
– SUITE 420 –
6501 N.W. 36th STREET
MIAMI, FLORIDA 33166

BRUCE A. SMATHERS
SECRETARY OF STATE

April 14, 1977

DAVID C. MACNAMARA
ASSISTANT SECRETARY OF STATE

F. R. RITTER
DIRECTOR
DIVISION OF CORPORATIONS

Telephone: 904/488-3140

Daniel Retter
Suite 801-805
Dade Federal Building
101 East Flagler St.
Miami, Fla. 33131

SUBJECT: Amendment to TALMUDIC COLLEGE OF FLORIDA, INC.

Dear Sir:

Charter Number: 730616

This will acknowledge receipt of the following:

1. XX Check in the amount of $ 20.00
2. ____ Articles of Incorporation.
3. XX Amendment to Articles of Incorporation files. 4-8-77 Non Profit
4. ____ Articles of Merger or Consolidation filed.
5. ____ Certificate of Withdrawal filed.
6. ____ Limited Partnership filed.
7. ____ Trademark Application filed.
8. ____ Application for qualification filed _____. It is no longer required to issue a permit. A certificate under seal to this effect may be obtained for $5.
9. ____ Reinstatement filed.
10. ____ Dissolution filed.
11. XX OTHER: Amending Articles of Incorporation.

ENCLOSED:

1. XX Certified Copy(ies).
2. ____ Certificate(s) Under Seal.
3. ____ Photocopy(ies).
4. ____ OTHER:

mtv/kh

CORP - 100
11-22-76

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
– SUITE 420 –
6501 N.W. 36th STREET
MIAMI, FLORIDA 33166

Secretary of State

STATE OF FLORIDA
THE CAPITOL
TALLAHASSEE 32304

Division of Corporations
Charter Section

BRUCE A. SMATHERS
SECRETARY OF STATE

Telephone Number
904/488-2675

April 1, 1977

Daniel Retter
Suite 801-805 Dade Federal Building
101 East Flagelr Street
Miami, Florida 33131

Dear Mr. Retter:

SUBJECT: TALMUDIC COLLEGE OF FLORIDA, INC.

Returned XX, Pending _____. Check acknowledged _____.

1. _____ NAME IS NOT AVAILABLE
2. _____ The corporate name must be identical wherever it appears in the articles.
3. _____ The corporation's name must include a corporate suffix.
4. XX [redacted] OVER PAYMENT: Check should be for $20.00. ($15.00 to file the amendment and $5.00 for a certified copy.
5. _____ Address for (a) Registered Office; (b) Incorporators; (c) Directors.
6. _____ The number of directors the corporation shall have must be shown with a statement designating the total number.
7. _____ The Articles state that there will be _____ director(s) (initially). However, _____ are listed.
8. _____ Notary Public's acknowledgment is incomplete.
9. _____ The date of notarization must be the same as date of subscription.
10. _____ All incorporators must sign and one signature must be notarized.
11. _____ All incorporators signing the Articles of Incorporation must be listed in Article _____.
12. _____ A designation of registered office and registered agent, at the same street address, must be contained within the Articles of Incorporation pursuant to Section 607.164, Florida Statutes. Registered agent must sign accepting the designation.
13. _____ The effective date is not acceptable: (a) The Articles were not received in this office within five days of the date of acknowledgment: (b) The effective date is prior to the date of acknowledgment.
14. _____ Please delete any reference to Chapter 608, Florida Statutes as it was repealed January 1, 1976.
15. _____ Please indicate in your cover letter that your documents are being held pending arrival of the balance due.
16. _____ Documents must be legible for microfilming.
17. _____

FILED
APR 8 10 00 AM '77
SECRETARY OF STATE
MIAMI, FLORIDA

RECEIVED

CHA. 108 (Corp. 84)
07/01/76

Enclosure Check
xc

SPECIAL MEETING OF THE BOARD OF DIRECTORS

OF

TALMUDIC COLLEGE OF FLORIDA, INC.

FILED
APR 8 10 01 AM '77
SECRETARY OF STATE
MIAMI, FLORIDA

held at 801 Dade Federal Building, 101 East Flagler Street, Miami, Florida on the 9th day of February, 1977, at 10:00 in the forenoon.

PRESENT WERE: All of the Directors and Officers of the Corporation.

DISCUSSION WAS HAD and it was unanimously decided that the corporation would amend its articles of incorporation and notwithstanding any other provision of these articles, this corporation shall not carry on any other activities not permitted to be carried on by (a) a corporation exempt from Federal income tax under Section 501(c)(3) of the Internal Revenue Code of 1954 or the corresponding provision of any future United States Internal Revenue Law or (b) a corporation contributions to which are deductible under Section 170 (c)(2) of the Internal Revenue Code of 1954 or any other corresponding provision of any future United States Internal Revenue Law.

THERE BEING NO further business to come before the Board, the meeting was upon motion duly made, seconded and unanimously carried, adjourned.

DATED this 9th day of February, 1977.

Rabbi Y. Zweig, President

Rabbi Milton Simon, Secretary

BEFORE ME, personally appeared RABBI Y. ZWEIG and RABBI MILTON SIMON, the President and Secretary respectively and acknowledged that they executed the foregoing.

NOTARY PUBLIC
NOTARY PUBLIC, STATE of FLORIDA at LARGE
MY COMMISSION EXPIRES SEPT. 27, 1977
BONDED THRU MAYNARD BONDING AGENCY

730616

AMENDMENT

TALMUDIC COLLEGE OF FLORIDA, INC.

AR -5-77 =2 164088 ****5.0
AR -5-77 =2 163988 ****15.0

UPDATED KH
DATE - 6.29.77

FILED: 6/17/77

amending Articles of Incorporation

CHARTER #730616

C. FAX .....
FLNG 15.00
R. AGENT .....
C. COPY 5.00
TOTAL 20.00
N. BANK .....
BALANCE DUE .....
REFUND .....
PH TO COPY .....

Secretary of State

STATE OF FLORIDA
THE CAPITOL
TALLAHASSEE 32304

June 22nd, 1977

F. R. RITTER, Director
Division of Corporations
904/488-3140

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
— SUITE 420 —
6501 N.W. 36th STREET
MIAMI, FLORIDA 33166

BRUCE A. SMATHERS
SECRETARY OF STATE

DAVID C. MACNAMARA
ASSISTANT SECRETARY OF STATE

Mr. Rabbi J. Burstyn
4014 Chase Avenue
Miami Bch., FL 33140

Dear Sir:

SUBJECT: **TALMUDIC COLLEGE OF FLORIDA, INC.**

DOCUMENT NUMBER: **730616**

This will acknowledge receipt of the following:

1. **XX** Check(s) totalling $ **20.00**
2. _____ Articles of Incorporation filed
3. **XX** Amendments to Articles of Incorporation filed **6/17/77**
4. _____ Articles of Merger or Consolidation filed
5. _____ Certificate of Withdrawal filed
6. _____ Limited Partnership filed
7. _____ Limited Partnership Annual Report filed
8. _____ Trademark Application filed
9. _____ Application for qualification filed _____. It is no longer required to issue a permit. A certificate under seal to this effect may be obtained for $5.
10. _____ Reinstatement filed
11. _____ Articles of Dissolution filed
12. **XX** OTHER: **amending Articles of Incorporation.**

ENCLOSED:

1. **XX** Certified Copy(ies).
2. _____ Certificate(s) Under Seal.
3. _____ Photocopy(ies).
4. _____ OTHER:

Corp. 100
1/1/77 [illegible]

בית מדרש הגדול

TALMUDIC COLLEGE OF FLORIDA

4014 CHASE AVENUE, MIAMI BEACH, FLORIDA 33140

534-7050

RABBI YOCHANAN ZWEIG
President and Rosh HaYeshiva

RABBI JACOB M POUPKO
Associate Rosh Yeshiva

MOSHE CHAIM BERKOWITZ
Chairman

June 15, 1977

Secretary of State
Department of State
Division of Coporations
Suite 420
6501 N.W. 36th Street
Miami, Florida 33166

FILED
Jun 17 8 29 AM '77
SECRETARY OF STATE
MIAMI, FLORIDA

Dear Sirs:

Enclosed please find our check in the amount of $20 made payably to the Secretary of State office. This is in payment for:

A) $15 for amendment to articles of incorporation files (non-profit).

B) $5 for one certified copy

Please do whatever necessary to expedite this matter as we need these certificates for IRS as soon as possible.

Thank you for your cooperation.

Sincerely,

Rabbi J. Burstyn
Executive Director

AMENDMENT TO THE ARTICLES OF INCORPORATION

SPECIAL MEETING OF THE BOARD OF DIRECTORS

OF

TALMUDIC COLLEGE OF FLORIDA, INC.

held at 4014 Chase Avenue, Miami Beach, Florida, 33140 on the 10th of June, 1977, at 10:00 in the forenoon.

PRESENT WERE: All of the Directors and Officers of the Corporation.

DISCUSSION WAS HAD and it was unanimously decided that the corporation would amend its articles of incorporation and no applicant for admission to the courses and programs offered by this school shall be denied because of race, creed, color or national origin of the applicant.

THERE BEING NO further business to come before the Board, the meeting was upon motion duly made, seconded and unanimously carried, adjourned.

FILED
JUN 17 8 29 '77
SECRETARY OF STATE
MIAMI, FLORIDA

DATED this 10th of June, 1977

Rabbi Y. Zweig, President

Rabbi Milton Simon, Secretary

BEFORE ME, personally appeared RABBI Y. ZWEIG and RABBI MILTON SIMON, the President and Secretary respectively and acknowledged that they executed the foregoing.

NOTARY PUBLIC

NOTARY PUBLIC STATE OF FLORIDA at LARGE
MY COMMISSION EXPIRES SEPTEMBER 1, 1978
BONDED BY AMERICAN DRIVERS INSURANCE CO.

corp-32

NP # 730616

A

TALMUDIC COLLEGE OF FLORIDA, INC.

(X) New Corporation ( ) Reincorporation ( ) Amendment (§617.02)

Filed: 9/5/74 By:

THE FILING FEE FOR THE 1978 ANNUAL REPORT IS $10.

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

CORPORATION ANNUAL REPORT
1978

Bruce A. Smathers
Secretary of State

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE (Form COR 620) 12-1-77

ANC 2
FILED
FEE 2
APR 7 8 06 AM 1978
FLORIDA DEPT. OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

▶ *READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES* ◀

1. Name and Address of Corporation Principal Office:

730616 TALMUDIC COLLEGE OF
FLOIRDA, INC.
4014 CHASE AVENUE
MIAMI BEACH, FL 33140

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State | Zip Code

3. Date Incorporated or Qualified To Do Business in Florida	4. Federal Employer Identification Number (FEIN)	5. Date of Last Report
AUG. 1974	59-1571122	1977

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Director (x)	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
ZWEIG, RABBI YOCHANAN	PRES	X	3791 ROYAL PALM AVENUE	MIAMI BEACH, FL
ENTIN, ROBERT	V.P.	X	3711 CHASE AVENUE	MIAMI BEACH, FL
SIMON, MILTON	SEC	X	2850 PRAIRIE AVENUE	MIAMI BEACH, FL

7. Registered Agent Information

Name: [illegible] ENTIN

Street Address (Do NOT Use P.O. Box Number): 101 EAST FLAGLER STREET

City, State and Zip Code: MIAMI, FL 33162

If you wish to change Registered Agent on this form, enter all new information here ▶

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

8. An officer of the Corporation must sign this report. This report must be signed by one of the following: The President, Vice President, Secretary, Assistant Secretary or Treasurer or if the Corporation is in the hands of a receiver or trustee, shall be executed on behalf of the Corporation by the receiver or trustee.

No Other Titles Will Be Accepted, Your Report Will Be Returned If It Does NOT Bear An Authorized Signature.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.

Typed Name of Signing Officer	Title	Telephone Number
Rabbi Yochanan Zweig	President	534-7050
Signature		**Date**
X Rabbi Yochanan Zweig		January 3, 1978

NOTE: THE FILING FEE FOR THE 1978 ANNUAL REPORT IS $10.

THE FILING FEE FOR THE 1979 ANNUAL REPORT IS $10.

CORPORATION ANNUAL REPORT

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

1979

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

DO NOT WRITE IN THIS SPACE

FILED
79 APR 12 AM 11:12
SECRETARY OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

◄ READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES ►

1. Name and Address of Corporation Principal Office:

730616 TALMUDIC College of Florida Inc.
9014 CHASE AVENUE
MIAMI BEACH, FL 33140

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State | Zip Code

3. Date Incorporated or Qualified To Do Business In Florida: 9/05/1974

4. Federal Employer Identification Number (FEIN): 59-1571122

5. Date of Last Report: 1978

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
ZWEIG,RABBI YOCHANAN	P/D	3791 ROYAL PALM AVENUE	MIAMI BEACH, FL
ENTIN,ROBERT	V/D	3711 CHASE AVENUE	MIAMI BEACH, FL
SIMON,MILTON	S/D	2850 PRAIRIE AVENUE	MIAMI BEACH, FL

7. Registered Agent Information

Name: RETTER, DANIEL

Street Address (Do NOT Use P.O. Box Number): 101 EAST FLAGLER STREET

City, State and Zip Code: MIAMI, FL 33162

If you wish to change Registered Agent on this form, enter all new information below.

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

8. **See signature restrictions under instructions on reverse side of this form.**

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath

DO NOT WRITE IN THIS SPACE

MH 42

Typed Name of Signing Officer: Rabbi J. Berstyn, Milton Simin

Title: Secretary Director

Telephone Number: 305 - 534-7050

Signature: Milton Simon

Date: 1 - 24 - 79

(Form COR 2(X) Rev. 10/75/78)

NOTE: THE FILING FEE FOR THE 1979 ANNUAL REPORT IS $10.

04-05-79 2 6 105 10.00

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT

1980

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

APPROVED
AND
FILED

MAR 17 9 10 AM 1980

FLORIDA DEPT. OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES
PLEASE STAPLE CHECK TO ANNUAL REPORT

1. Name and Address of Corporation Principal Office:

730616
TALMUDIC COLLEGE OF FLOIRDA, INC.
4014 CHASE AVE
MIAMI BEACH, FL 33140

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State | Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 9/05/1974

4. Federal Employer Identification Number (FEIN): 59-1571122

5. Date of Last Report: 1979

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
ZWEIG,RABBI YOCHANAN	P/D	3791 ROYAL PALM AVENUE	MIAMI BEACH, FL
ENTIN,ROBERT	V/D	3711 CHASE AVENUE	MIAMI BEACH, FL
SIMON,MILTON	S/D	2850 PRAIRIE AVENUE	MIAMI BEACH, FL

7. Registered Agent Information

Name: REITER, DANIEL

Street Address (Do NOT Use P.O. Box Number): 1 Biscayne Towers #1170

City, State and Zip Code: MIAMI, FL 33131

To change the Registered Agent and/or Registered Office a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with a fee of $3.

8. See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath:

Typed Name of Signing Officer	Title	Telephone Number
Milton Simon	Secretary /Director	305-534-7050

Signature: Milton Simon

Date: 2-18-80

DO NOT WRITE IN THIS SPACE
TB 3.17.80

730616 03-03-80 2 7 277 10.00

Form COR 620 Rev. 11/79

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION
ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

1981

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

DO NOT WRITE IN THIS SPACE

FILED

APR 7 | 19 PM '81

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES

PLEASE STAPLE CHECK TO ANNUAL REPORT

1. Name and Address of Corporation Principal Office:

730616
TALMUDIC COLLEGE OF FLOIRDA, INC.
4014 CHASE AVE
MIAMI BEACH, FL 33140

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 9/05/1978

4. Federal Employer Identification Number (FEIN): 59-1571122

5. Date of Last Report: 1980

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
ZWEIG,RABBI YOCHANAN	P/D	3791 ROYAL PALM AVENUE	MIAMI BEACH, FL
ENTIN,ROBERT	V/D	3711 CHASE AVENUE	MIAMI BEACH, FL
SIMON,MILTON	S/D	2850 PRAIRIE AVENUE	MIAMI BEACH, FL

7. Registered Agent Information

Name
METTER, DANIEL

Street Address (Do NOT Use P.O. Box Number)
1 BISCAYNE TOWERS #1770

City, State and Zip Code
MIAMI, FL 33131

To change the Registered Agent and/or Registered Office a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with a fee of $3.

8. *See signature restrictions under instructions on reverse side of this form.*

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Typed Name of Signing Officer	Title	Telephone Number
Milton Simon	S/D	534-8444

Signature: Milton Simon

Date: 1/29/81

730616 03-18-81 2 1 455 10.00

DO NOT WRITE IN THIS SPACE

(Form CORP 1501 Rev. 10/28/80)

81-4/15

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT **1982**

George Firestone
Secretary of State

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

APPROVED
AND
FILED

APR 9 9 02 AM 1982

FLORIDA DEPT. OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of $10 Required —Make Checks Payable To: *Secretary of State*

1. Name and Address of Corporation Principal Office.

730616
TALMUDIC COLLEGE OF FLOIRDA, INC.
4014 CHASE AVE
MIAMI BEACH, FL 33140

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 09/05/1974

4. Federal Employer Identification Number (FEIN): 59-1571122

5. Date of Last Report: 04/07/1981

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
ZWEIG,RABBI YOCHANAN	P/D	3791 ROYAL PALM AVENUE	MIAMI BEACH, FL
ENTIN,ROBERT	V/D	3711 CHASE AVENUE	MIAMI BEACH, FL
SIMON,MILTON	S/D	2650 PRAIRIE AVENUE	MIAMI BEACH, FL

Registered Agent Information

7. Name and Address of Current Registered Agent

RETTER, DANIEL
1 BISCAYNE TOWERS #1770
MIAMI, FL 33131

8. Name and Address of New Registered Agent

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

Such change was authorized by resolution duly adopted by its board of directors on _____

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

10. *See signature restrictions under instructions on reverse side of this form.*

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath

Signature	Date
Milton Simon	1-15-82
Typed Name of Signing Officer	**Title**	**Telephone Number**
MILTON SIMON	DIRECTOR	534-7050

CDR 420 (11-81)

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT

1983

George Firestone
Secretary of State

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

APPROVED
FILED
Mar 11 9:33 AM 1983
SECRETARY OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

► **Read Notice and Instructions on Other Side Before Making Entries**
Filing Fee of $10 Required —Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

730616
TALMUDIC COLLEGE OF FLORIDA, INC.
4014 CHASE AVE
MIAMI BEACH, FL 33140

If above address is incorrect in any way, enter the correct address in Item 2 Include Zip Code

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone Is NOT Sufficient

Street Address

P.O. Box No.

City

State Zip Code

3. Date Incorporated or Qualified To Do Business in Florida	4. Federal Employer Identification Number (FEIN)	5. Date of Last Report
09/05/1979	59-1571122	04/09/1982

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
ZWEIG,RABBI YOCHANAN	P/D	3791 ROYAL PALM AVENUE	MIAMI BEACH, FL
ENTIN,ROBERT	V/D	3711 CHASE AVENUE	MIAMI BEACH, FL
SIMON,MILTON	S/D	2850 PRAIRIE AVENUE	MIAMI BEACH, FL

Registered Agent Information

7. Name and Address of Current Registered Agent

RETTER, DANIEL

1 BISCAYNE TOWERS #1770

MIAMI, FL 33131

8. Name and Address of New Registered Agent

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

9. Pursuant to the provisions of Sections 607.334 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

Such change was authorized by resolution duly adopted by its board of directors on _____

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

10. *See signature restrictions under instructions on reverse side of this form.*

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.

Signature Milton Simon — Date Jan 10, 1983

Typed Name of Signing Officer: Milton Simon — Title: Director — Telephone Number: 305-534-7054

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT

1984

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED
MAR 28 10 51 AM 1984
FLORIDA DEPT OF STATE
CORPORATION DIVISION
TALLAHASSEE, FLORIDA

◀ Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $10 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office:

730616
TALMUDIC COLLEGE OF FLORIDA, INC.
4014 CHASE AVE
MIAMI BEACH, FL 33140

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State Zip Code

3. Date Incorporated or Qualified To Do Business in Florida	4. Federal Employer Identification Number (FEIN)	5. Date of Last Report
09/05/1974	59-1571122	03/11/1983

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1983

	Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
1	ZWEIG,RABBI YOCHANAN	P/D	3791 ROYAL PALM AVENUE	MIAMI BEACH, FL
2	ENTIN,ROBERT	V/D	3711 CHASE AVENUE	MIAMI BEACH, FL
3	SIMON,MILTON	S/D	2850 PRAIRIE AVENUE	MIAMI BEACH, FL

Registered Agent Information

7. Name and Address of Current Registered Agent

RETTER, DANIEL
1 BISCAYNE TOWERS #1770

MIAMI, FL 33131

8. Name and Address of New Registered Agent

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered officer or registered agent, or both, in the state of Florida.

Such change was authorized by resolution duly adopted by its board of directors on: _____

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

10. *See signature restrictions under instructions on reverse side of this form.*
I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Signature	Date
Milton Simon	Jan 9, 1984
Typed Name of Signing Officer	**Title**	**Telephone Number**
Milton Simon	Secretary/Director	305-534-7050

11. *Should you desire a certificate of status check the box below and include an additional $5.00 with your payment*

CERTIFICATE OF STATUS DESIRED ☐
$5 Additional fee required for certificates

COR 620 (1-84)

DUE DATE ON OR AFTER JANUARY 1 BE DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION

ANNUAL REPORT

1985

APPROVED
AND
FILED

'85 MAR 25 PM 2:38

◄ Read Notice and Instructions on Other Side Before Making Entries ►

Filing Fee of $20 Required — Make Checks Payable To Secretary of State

1 Name and Address of Corporation Principal Office

730616 0
TALMUDIC COLLEGE OF FLORIDA, INC.
4014 CHASE AVE
MIAMI BEACH, FL 33140

If above address is incorrect in any way, enter the correct address in item 2 Include Zip Code

2 Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient

Street Address

P.O. Box No.

City

State Zip Code

3 Date Incorporated or Qualified To Do Business in Florida 09/05/1974

4 Federal Employer Identification Number 59-1571125

5 Date of Last Report 03/28/1984

6 Names and Street Addresses of Each Officer and Director, as of December 31, 1984

	Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
1	ZWEIG, RABBI YOCHANAN	P/D	3791 ROYAL PALM AVENUE	MIAMI BEACH, FL
2	~~ENTIN, ROBERT~~	~~V/D~~	~~3721 CHAGE AVENUE~~	~~MIAMI BEACH, FL~~
3	SIMON, MILTON	S/D	2050 PRAIRIE AVENUE	MIAMI BEACH, FL
4	Burstyn, Ath Jeremiah	V/D	3400 Royal Palm	Miami Beach Fl.
5				
6				

Registered Agent Information

7 Name and Address of Current Registered Agent

BETTER, DANIEL
1 BISCAYNE TOWERS #1770
MIAMI, FL 33131

8 Name and Address of New Registered Agent

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

9 Pursuant to the provisions of Section 607.034 and 607.037, Florida Statutes, the above-named corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida
Such change was authorized by resolution duly adopted by its board of directors on _____
I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

10 *See signature restrictions under instructions on reverse side of this form.*

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath
(Officer signing must be listed in Block 6)

Signature Milton Simon Date March 18, 85

Typed Name of Signing Officer MILTON SIMON Title Secretary Telephone Number 305-534-7050

11 Should you desire a certificate of status check the box. CERTIFICATE OF STATUS DESIRED ☐

$5 additional fee required for a Certificate of Status

CR2E024 (1/85)

90 DAY NOTICE OF INTENT TO DISSOLVE

APPROVED

CORPORATION

ANNUAL REPORT

1986

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

FILED

1986 SEP -5 AM 10:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

◄ Read Notice and Instructions on Other Side Before Making Entries ►

Filing Fee of $20 Required – Make Checks Payable To: *Secretary of State*

1 Name and Address of Corporation Principal Office

730616 D
TALMUDIC COLLEGE OF FLORIDA, INC.
4014 CHASE AVE
MIAMI BEACH, FL 33140

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2 Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida: 09/05/1974

4. Federal Employer Identification Number (FEIN): 59-1571122

5. Date of Last Report: 03/25/1985

6 Names and Street Addresses of Each Officer and Director, as of December 31, 1985

1 Names of Officers and Directors	2 Title	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State 5
1 ZWEIG, RABBI YOCHANAN	P/D	3791 ROYAL PALM AVENUE	MIAMI BEACH, FL
2 BURSTYN, JEREMIAH	V/D	3400 ROYAL PALM	MIAMI BEACH, FL
3 SIMON, MILTON	S/D	2850 PRAIRIE AVENUE	MIAMI BEACH, FL

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

RETTER, DANIEL
1 BISCAYNE TOWERS #1770
MIAMI, FL 33131

8 Name and Address of New Registered Agent

Name 81: Abraham Al Galbut

Street Address (Do NOT Use P.O. Box Number) 82: 999 Washington Avenue

City and State 83: M.B. FL.

Zip Code 84: 33139

9 Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.
Such change was authorized by resolution duly adopted by its board of directors on Aug. 1, 86

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE Abraham Al Galbut (Registered Agent Accepting Appointment) DATE Aug. 18, 86

$3.00 additional fee required for Registered Agent changes.

10 *See signature restrictions under instructions on reverse side of this form.*

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath
(Officer signing must be listed in Block 6)

Signature: Milton Simon

Date: AUG. 18 86

Typed Name of Signing Officer: MILTON SIMON

Title: Secretary

Telephone Number: 305-334-8444

11 Should you desire a certificate of status check the box

CERTIFICATE OF STATUS DESIRED ☐

$5 Additional Fee required for a Certificate of Status

CR2E034 (1/86)

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1, 1987

CORPORATION

ANNUAL REPORT
1987

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $25 Required – Make Checks Payable To: Secretary of State

1 Name and Address of Corporate or Principal Office

730616 D
TALMUDIC COLLEGE OF FLORIDA, INC.
4014 CHASE AVE
MIAMI BEACH, FL 33140

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2 Enter Change of Address of Corporation Principal Office, P.O. Box Number Address is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3 Date Incorporated or Qualified To Do Business in Florida: 09/05/1974

4 Federal Employer Identification Number (FEIN): 59-1571122

5 Date of Last Report: 09/05/1986

6 Names and Street Addresses of Each Officer and Director as of December 31, 1986

Names of Officers and Directors 7	Title 7	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 8	City and State 9
1. ZWEIG, RABBI YOCHANAN	P/D	3791 ROYAL PALM AVENUE	MIAMI BEACH, FL
2. BURSTYN, JEREMIAH	V/D	3400 ROYAL PALM	MIAMI BEACH, FL
3. SIMON, MILTON	S/D	2850 PRAIRIE AVENUE	MIAMI BEACH, FL
3a.			
4.			
4a.			
5.			
5a.			
6.			
6a.			

REGISTERED AGENT INFORMATION

7 Name and Address of Current Registered Agent

~~RETTER, DANIEL~~
~~1 BISCAYNE TOWERS #1710~~
~~MIAMI, FL 33131~~

8 Name and Address of New Registered Agent

Name 81: See info on attached

Street Address 1 (Do NOT Use P.O. Box Number) 82: photo copy of application

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84: Miami Beach, FL 33139

Zip Code 85

9 Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office, or registered agent, or both, in the State of Florida.
Such change was authorized by resolution duly adopted by its board of directors on _____

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes

10 See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.
Officer signing must be listed in Block 6.

Signature: Milton Simon

Date: March 5, 87

Typed Name of Signing Officer: MILTON SIMON

Title: Secretary

Telephone Number: 305-534-8444

Should you desire a certificate of status check the box:

CERTIFICATE OF STATUS DESIRED ☐

$5 Additional Fee required for a Certificate of Status

FILE NOW, OR THIS CORPORATION WILL BE DISSOLVED ON NOVEMBER 4, 1988!

CORPORATION

ANNUAL REPORT

1988

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

APPROVED AND FILED

1988 AUG 18 PM 1:37

FLORIDA DEPT. OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

Filing Fee of $25 Required — Make Checks Payable to Secretary of State

1. Name and Address of Corporation Principal Office:

730616 0
TALMUDIC COLLEGE OF FLORIDA, INC.
4014 CHASE AVE
MIAMI BEACH, FL 33140

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida: 09/05/1974

4. Federal Employer Identification Number (FEIN): 59-1571122

5. Date of Last Report: 03/20/1987

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1987

	1 Names of Officers and Directors	2 Title	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State
1	ZWEIG, RABBI YOCHANAN	P/D	3791 ROYAL PALM AVENUE	MIAMI BEACH, FL
2	BURSTIN, JEREMIAH	V/D	3400 ROYAL PALM	MIAMI BEACH, FL
3	SIMON, MILTON	S/D	2850 PRAIRIE AVENUE	MIAMI BEACH, FL
4				
5				
6				

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

GOLBET, ABRAHAM
999 WASHINGTON AVE
MIAMI BEACH, FL 33139

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84 FL.

Zip Code 85

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by resolution duly adopted by its board of directors on: ______

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE ______ (Registered Agent Accepting Appointment) DATE ______

10. If a foreign corporation, date first transacted business in Florida ______

11. See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath. (Officer or Director signing must be listed in Block 6.)

Signature: Milton Simon

Date: Aug. 12, 88

Typed Name of Signing Officer or Director: Milton Simon

Title: Secretary

Telephone Number: 305-534-7050

12. Should you desire a certificate of status check the box

CERTIFICATE OF STATUS DESIRED ☐

CR2E034 (1/88)

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST

CORPORATION

ANNUAL REPORT

1989

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

APPROVED
AND
FILED

89 JUN 21 AM 8:33

FLORIDA DEPT OF STATE
TALLAHASSEE, FLORIDA

Filing Fee of $35 Required - Make Checks Payable to Secretary of State

1. Name and Address of Corporation Principal Office

ZIP + 4

730616 0
TALMUDIC COLLEGE OF FLORIDA, INC.
4014 CHASE AVE
MIAMI BEACH, FL 33140-3490

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2. Enter Corporation Principal Office Address If Different Than Subscent

Street Address 21

P O Box No 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida	4. Federal Employer Identification Number (FEID)	5. Date of Last Report
09/05/1974	59-1571122	08/18/1988

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1988

	1 Title	2 Names of Officers and Directors	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State 5
1	P/D	ZWEIG, RABBI YOCHANAN	3791 ROYAL PALM AVENUE	MIAMI BEACH, FL
1x				
2	V/D	BURSTYN, JEREMIAH	3400 ROYAL PALM	MIAMI BEACH, FL
2x				
3	S/D	SIMON, MILTON	2850 PRAIRIE AVENUE	MIAMI BEACH, FL
3x				
4				
4x				
5				
5x				
6				
6x				

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

GOLBET, ABRAHAM
999 WASHINGTON AVE
MIAMI BEACH, FL 33139

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84 FL

Zip Code 85

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.
Such change was authorized by resolution duly adopted by its board of directors on: _____

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

10. If a foreign corporation, date first transacted business in Florida _____

11

See signature restrictions under instructions on reverse side of this form

I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.
(Officer or Director Signing must be listed in Block 6.)

Signature [signature]

Date March 27, 89

Typed Name of Signing Officer or Director: Jeremiah Burstyn

Title: Vice Pres.

Telephone Number: 305-534-7050

12. Should you desire a certificate of status check this box

CERTIFICATE OF STATUS DESIRED

CR2E.COH (1-89)

FILE NOW! THIS ANNUAL REPORT WILL BE DELINQUENT AFTER JULY 1ST

CORPORATION

ANNUAL REPORT

1990

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

APPROVED

FILED

1990 JUN 29 AM 10:21

Filing Fee of $35 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office: 730616 0

ZIP + 4 PRESORT

TALMUDIC COLLEGE OF FLORIDA, INC.
4014 CHASE AVE
MIAMI BEACH, FL 33140-3490

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box number alone is NOT sufficient. The NAME of the corporation can be changed only by filing an amendment.

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida: 09/05/1974

4. FEI Number: 59-1571122

☐ FEI Number Applied For
☐ FEI Number Not Applicable

5. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

	Title 1	Names of Officers and Directors 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4	5
1	P/D	ZWEIG,RABBI YOCHANAN	3791 ROYAL PALM AVENUE	MIAMI BEACH, FL	
1a					
2	V/D	BURSTYN, JEREMIAH	3400 ROYAL PALM	MIAMI BEACH, FL	
2a					
3	S/D	SIMON,MILTON	2850 PRAIRIE AVENUE	MIAMI BEACH, FL	
3a					
4					
4a					
5					
5a					
6					
6a					

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

GOLBET, ABRAHAM
999 WASHINGTON AVE
MIAMI BEACH, FL 33139

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84 FL.

Zip Code 85

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.
Such change was authorized by resolution duly adopted by its board of directors on: ________

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE ________ DATE ________
(Registered Agent Accepting Appointment)

10. I certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, F.S.

Signature [signature]

Date June 15/90

Typed Name of Signing Officer or Director: Jeremiah Burstyn

Title: Vice-President

Telephone Number: 305-534-7050

11. Should you desire a certificate of status check the box

CERTIFICATE OF STATUS DESIRED ☐

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT

1991

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

JUN 25 91

APPROVED
FL. DEPT. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FL
FILED

FILING FEE OF $61.25 REQUIRED

DO NOT WRITE IN THIS SPACE

1 Name and Mailing Address of Corporation

DOCUMENT #730616 (0)

ZIP + 4 PRESORT

P89000046

TALMUDIC COLLEGE OF FLORIDA, INC.
4014 CHASE AVE
MIAMI BEACH, FL 33140-3490

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2 If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment

21 Street Address

22 P.O. Box No

23 City and State

24 Zip Code

3 Date Incorporated or Qualified To Do Business in Florida
09/05/1974

4. FEI Number
59-1571122

FEI Number Applied For

FEI Number Not Applicable

5 CERTIFICATE OF STATUS DESIRED

6 Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

	Title 1	Names of Officers and Directors 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4
1	P/D	ZWEIG,RABBI YOCHANAN	3791 ROYAL PALM AVENUE	MIAMI BEACH, FL
1x				
2	V/D	BURSTYN, JEREMIAH	3400 ROYAL PALM	MIAMI BEACH, FL
2x				
3	S/D	SIMON,MILTON	2850 PRAIRIE AVENUE	MIAMI BEACH, FL
3x				
4				
4x				
5				
5x				
6				
6x				

REGISTERED AGENT INFORMATION:

7. Name and Address of Current Registered Agent

GOLBET, ABRAHAM
999 WASHINGTON AVE
MIAMI BEACH, FL 33139

8. Name and Address of New Registered Agent

81 Name

82 Street Address 1 (Do NOT Use P.O. Box Number)

83 Street Address 2 (Do NOT Use P.O. Box Number)

84 City FL. 85 Zip Code

9 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors.

I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

10 I certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 6 or on an attachment with an address.

SIGNATURE _____ DATE JUNE 10, 91

Typed Name of Signing Officer or Director: JEREMIAH BURSTYN Title: Vice PRESIDENT Telephone Number Daytime: (305) 534-7050

FILING FEE OF $61.25 REQUIRED—Make Checks Payable To: Secretary of State $8.75 Additional Fee required for a Certificate of Status

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT

1992

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

JUN 1992

APPROVED
SEC. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FLA.
FILED

FILING FEE $61.25 Make Payable To Secretary of State

DO NOT WRITE IN THIS SPACE

1. Name and Mailing Address of Corporation DOCUMENT #730616 (0)

Please type

TALMUDIC COLLEGE OF FLORIDA, INC.
4014 CHASE AVE
MIAMI FL 33140-3421

If above address is incorrect in any way, line through the incorrect information and enter correct address in Block 2.

2. If Address in Block 1 is incorrect in any way, line through the incorrect information and enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Mailing Address

22 P.O. Box No.

23 City and State | 24 Zip Code

3. Date Incorporated or Qualified To Do Business in Florida 09/05/1974

3a. Date of Last Report: 06/28/1991

4. FEI Number: 59-1571122

FEI Number Applied For

FEI Number Not Applicable

5. [redacted]

CERTIFICATE OF STATUS DESIRED ☐

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

	1 Title	2 Names of Officers and Directors	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State
1 / 1x	P/D	ZWEIG,RABBI YOCHANAN	3791 ROYAL PALM AVENUE	MIAMI BEACH, FL
2 / 2x	V/D	BURSTYN, JEREMIAH	3400 ROYAL PALM	MIAMI BEACH, FL
3 / 3x	S/D	SIMON,MILTON	2850 PRAIRIE AVENUE	MIAMI BEACH, FL
4 / 4x				
5 / 5x				
6				

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

GILBET, ABRAHAM
999 WASHINGTON AVE
MIAMI BEACH, FL 33139

8. Name and Address of New Registered Agent

81 Name

82 Street Address 1 (Do NOT Use P.O. Box Number)

83 Street Address 2 (Do NOT Use P.O. Box Number)

84 City FL. | 85 Zip Code

9. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

CRDL_34 (11/91)

10. This corporation has liability for intangible tax under S. 199.032, Florida Statutes. Yes ☐ No ● (See other side for information on intangible tax.)

11. I certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607 or Chapter 617, Florida Statutes; and that my name appears in Block 6 or an attachment with an address.

SIGNATURE _____ DATE June 1, 92

Typed Name of Signing Officer or Director: JEREMIAH BURSTYN | Title: Vice-President | Telephone Number Daytime: (305) 534-7050

12. Should you wish to contribute to the Election Campaign Financing Trust Fund, check the box and include an additional $5.00 to the filing fee. ☐

File Now. Filing Fee after May 1 is $225.00

CORPORATION ANNUAL REPORT 1993

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

MC-093

APPROVED
SEC. OF STATE
TALLAHASSEE, FLA.
FILED

1. Name and Mailing Address of Corporation. DOCUMENT # 730616 (0)

TALMUDIC COLLEGE OF FLORIDA, INC.
4014 CHASE AVE
MIAMI BEACH FL 33140-3446

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/05/1974
3a. Date of Last Report: 06/19/1992

FILING FEE $200.00 | ANNUAL REPORT $61.25 + $138.75 CORPORATION SUPPLEMENTAL FEE | MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

4. FEI Number: 591571122 ☐ Applied For ☐ Not Applicable

2. Mailing Address
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Principle Place of Business
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

5. Certificate of Status Desired ☐ $8.75

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ $138.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

GALBUT, ABRAHAM
999 WASHINGTON AVE
MIAMI BEACH FL 33139

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code 86 Country

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

12. OFFICERS AND DIRECTORS		13. OFFICERS AND DIRECTORS CHANGES	
1.1 TITLE	P/D	1.1 TITLE	
1.2 NAME	ZWEIG, RABBI YOCHANAN	1.2 NAME	
1.3 ADDRESS	~~3201 INDIAN PALM AVENUE~~	1.3 ADDRESS	2035 N. BAY RD.
1.4 CITY-ST-ZIP	MIAMI BEACH FL	1.4 CITY-ST-ZIP	33139
2.1 TITLE	V/D	2.1 TITLE	
2.2 NAME	BURSTYN, JEREMIAH	2.2 NAME	
2.3 ADDRESS	~~9400 HOTEL PLAZA~~	2.3 ADDRESS	4147 N. Meridian Ave.
2.4 CITY-ST-ZIP	MIAMI BEACH FL	2.4 CITY-ST-ZIP	33140
3.1 TITLE	S/D	3.1 TITLE	
3.2 NAME	STRON, MILTON	3.2 NAME	
3.3 ADDRESS	2850 PRAIRIE AVENUE	3.3 ADDRESS	
3.4 CITY-ST-ZIP	MIAMI BEACH FL	3.4 CITY-ST-ZIP	33140
4.1 TITLE		4.1 TITLE	
4.2 NAME		4.2 NAME	
4.3 ADDRESS		4.3 ADDRESS	
4.4 CITY-ST-ZIP		4.4 CITY-ST-ZIP	
5.1 TITLE		5.1 TITLE	
5.2 NAME		5.2 NAME	
5.3 ADDRESS		5.3 ADDRESS	
5.4 CITY-ST-ZIP		5.4 CITY-ST-ZIP	
6.1 TITLE		6.1 TITLE	
6.2 NAME		6.2 NAME	
6.3 ADDRESS		6.3 ADDRESS	
6.4 CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information indicated on this annual report or supplemental annual 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 607 or Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 with an address.

SIGNATURE _____ DATE Apr. 23, 93

Jeremiah Burstyn | V/D | (305) 534-7050

CR2E031(1-91)

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

CORPORATION ANNUAL REPORT 1994

1. Corporation Name
TALMEDIC COLLEGE OF FLORIDA, INC.

DOCUMENT # 730616 (0)

Mailing Address
[redacted]
MIAMI BEACH FL 33140

Principal Place of Business
[redacted]
MIAMI BEACH FL 33140

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/05/1974	3a. Date of Last Report: 05/01/1993
4. FEI Number: 59-1571122	Applied For ☐ Not Applicable ☐
5. Certificate of Status Desired: [redacted] ☐	6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit Exempt from $150.75 Supplemental Fee ■	
8. The corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ■ No	

21 Mailing Address	26 Principal Place of Business
	1916 Alton Rd.
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip	25 Country
	29 Zip 33139
	30 Country

9. Name and Address of Current Registered Agent

GALBUT, ABRAHAM
899 WASHINGTON AVE
MIAMI BEACH FL 33139

10. Name and Address of New Registered Agent

31 Name
32 Street Address (P.O. Box Number is Not Acceptable)
33
34 City FL 35 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505 or 617.0503, Florida Statutes.

SIGNATURE _____ DATE _____
Registered Agent Accepting Appointment All CAPS. Registered Agent signature required when submitting

12. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	P/D	1.1 TITLE	
1.2 NAME	ZWEIG,RABBI YOCHANAN	1.2 NAME	
1.3 STREET ADDRESS	2695 N. BAY RD.	1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	MIAMI BEACH FL	1.4 CITY-ST-ZIP	33140
2.1 TITLE	V/D	2.1 TITLE	
2.2 NAME	BURSTYN, JEREMIAH	2.2 NAME	
2.3 STREET ADDRESS	4147 N. MERIDIAN AVE.	2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	MIAMI BEACH FL	2.4 CITY-ST-ZIP	33140
3.1 TITLE	S/D	3.1 TITLE	
3.2 NAME	SIMON,MILTON	3.2 NAME	
3.3 STREET ADDRESS	2650 PRAIRIE AVENUE	3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	MIAMI BEACH FL	3.4 CITY-ST-ZIP	33140
4.1 TITLE		4.1 TITLE	
4.2 NAME		4.2 NAME	
4.3 STREET ADDRESS		4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP		4.4 CITY-ST-ZIP	
5.1 TITLE		5.1 TITLE	
5.2 NAME		5.2 NAME	
5.3 STREET ADDRESS		5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP		5.4 CITY-ST-ZIP	
6.1 TITLE		6.1 TITLE	
6.2 NAME		6.2 NAME	
6.3 STREET ADDRESS		6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(i) in the event that the information supplied is declared exempt from public access. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I have fulfilled all obligations concerning unclaimed property imposed by Chapter 717, Florida Statutes; that I am an officer or director of the corporation or the receiver or trustee empowered to execute the report as required by Chapter 607 or Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ Jeremiah Burstyn April 18, 94 305-534-7050
(MUST BE MANUALLY SIGNED BY OFFICER OR DIRECTOR OR AUTHORIZED AGENT OF CORPORATION) Date Daytime Phone #

FILE NOT FILING FEE AFTER MAY 1 IS $500.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 PM 9:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 730616 (0)

1. Corporation Name
TALMUDIC COLLEGE OF FLORIDA, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
1890 ALTON RD MIAMI BEACH FL 33139 US	4014 CHASE AVE MIAMI BEACH FL 33140

3. Date Incorporated or Qualified: 09/05/1974
3a. Date of Last Report: 04/29/1994
4. FEI Number: 59-1571122 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address: 1890 Alton Rd.
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.
23. City & State	28. City & State: Miami Beach FL
24. Zip / 25. Country	29. Zip: 33139 / 30. Country: USA

5. Certificate of Status Desired ☐ — $6.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

GALBUT, ABRAHAM
999 WASHINGTON AVE
MIAMI BEACH FL 33139

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when remitting)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	ZWEIG,RABBI YOCHANAN	1.2 NAME	
STREET ADDRESS	2035 N. BAY RD.	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI BEACH FL	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	☐ Change ☐ Addition
NAME	BURSTYN, JEREMIAH	2.2 NAME	
STREET ADDRESS	4147 N. MERIDIAN AVE.	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI BEACH FL	2.4 CITY-ST-ZIP	
TITLE	SD	3.1 TITLE	☐ Change ☐ Addition
NAME	SIMON,MILTON	3.2 NAME	
STREET ADDRESS	2850 PRAIRIE AVENUE	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI BEACH FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jeremiah Burstyn April 4, 95 305-534-7050
SIGNATURE AND TYPED OR PRINTED NAME OF ASSIGNED OFFICER OR DIRECTOR — Date — Daytime Phone #