

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 731438

1. Entity Name

TEMPLE OHEL B'NAI RAPHAEL, INC.

Principal Place of Business

4351 WEST OAKLAND PARK BLVD.
LAUDERDALE LAKES FL 33313

Mailing Address

4351 WEST OAKLAND PARK BLVD.
LAUDERDALE LAKES FL 33313

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

23-7375274

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BRINSKY, JUDAH
3000 NW 48TH TERR
BLDG. 5, APT. 329
LAUDERDALE LAKES FL 33313

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 SD
NAME BRINSKY, JUDAH
STREET ADDRESS 3000 NW 48TH TERR
CITY-ST-ZIP LAUDERDALE LAKES FL ☐ Delete

TITLE D
NAME WHITE, JULES
STREET ADDRESS 2998 NW 48TH TERR
CITY-ST-ZIP LAUDERDALE LAKES FL 33313 ☒ Delete

TITLE D
NAME SAM MATZA
STREET ADDRESS 5101 NW 34TH ST
CITY-ST-ZIP LAUDERDALE LAKES FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE President D ☐ Change ☒ Addition
NAME David Waxman
STREET ADDRESS 9861 Sunrise Lakes Boulevard
CITY-ST-ZIP Sunrise, FL 33322

TITLE Vice-President D ☐ Change ☒ Addition
NAME Louis Tenner
STREET ADDRESS 4701 NW 34th Street
CITY-ST-ZIP Lauderdale Lakes, FL 33319

TITLE Secretary/Treasurer D ☐ Change ☒ Addition
NAME Elmore A. Cohen
STREET ADDRESS 2601 NW 48th Terrace
CITY-ST-ZIP Lauderdale Lakes, FL 33313

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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: *Judah Brinsky* REUDAH BRINSKY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/01

(954) 733-7684

Date

Daytime Phone #

CR2E037 (10/00)

FILED
May 21, 2001 8:00 am
Secretary of State

04-25-2001 90115 038 ****61.25



DO NOT WRITE IN THIS SPACE