2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 03, 2000 8:00 am
Secretary of State
03-03-2000 90193 023 ****61.25

DOCUMENT # 736203

1. Entity Name

CONGREGATION ETZ CHAIM, INC.

Principal Place of Business	Mailing Address
3970 NW 21 AVENUE OAKLAND PARK FL 33306 US	Congregation Etz Chaim 2455 E Sunrise Blvd – 10th Floor Ft. Lauderdale, FL 33304

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2455 EAST SUNRISE BLVD	2455 EAST SUNRISE BLVD
Suite, Apt. #, etc.: 10th FLOOR	Suite, Apt. #, etc.: 10th FLOOR
City & State: FT LAUDERDALE, FL	City & State: FT LAUDERDALE, FL
Zip: 33304 Country: USA	Zip: 33304 Country: USA

4. FEI Number: 58-2100313 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LANDSBERG, ALAN 300 S. PARK RD. SUITE 302 HOLLYWOOD FL 33021	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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD SHAPIRO, RICK 2301 NE 19 AVE WILTON MANORS FL 33305	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD ZIMMERMAN, MINDY 8060 SUNRISE LAKES DR N., #301 SUNRISE FL 33322	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD GREEN, CHARLES 6338 NW 40 CT BOCA RATON FL 33496	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD DR STEVEN LEDNER 780 NE 69TH ST #702 MIAMI, FL 33138	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD FREEDMAN, PHILLIP 1650 DIPLOMAT PARKWAY HOLLYWOOD FL 33019	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD ANDY WEISER 2840 NE 60TH ST FT LAUDERDALE, FL 33308	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

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: Shapiro, Rick VD 2-24-00 954-564-9232
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #