2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Secretary of State 02-05-2007 90092 003 ****61.25 **DOCUMENT #736203** CONGREGATION ETZ CHAIM, INC. 60011224 Principal Place of Business Mailing Address 1881 N.E. 26TH STREET 1881 N.E. 26TH STREET SUITE 100 SUITE 100 WILTON MANORS, FL 33305 WILTON MANORS, FL 33305 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite. Apt. #, etc. Suite Apt # etc. 02012007 Chg-NP CR2E037 (12/06) City & State City & State Applied For 58-2100313 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CHARLES, DAVID J C.P.A. 2805 E. OAKLAND PARK BLVD Street Address (P.O. Box Number is Not Acceptable) **PMB 449** FORT LAUDERDALE, FL 33306 City Zio 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. I am familiar with, and accept the obligations of registered agent SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to Trust Fund Contribution. Florida Department of State Due by May 1, 2007 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10 OFFICERS AND DIRECTORS 11 TITLE ☐ Delete TITLE ☐ Change Solition M DOLINGEY, SCOTT \$201 NORTH COURSE LANG KANE, BRAD NAME # 108 1401 NE 9TH STREET, # 1 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33304 CITY - ST - ZIP POMPANO BEACH, FL 33069 ☐ Delete TITLE ☐ Change ■ Addition TITLE ROSENBERG, ALEX NAME NAME STREET ADDRESS 520 NE 7TH AVE #2E STREET ADDRESS CITY-ST-ZIP DELRAY BEACH, FL 33483 CITY-ST-ZIP ☐ Change TITI F ☐ Delete TITLE ☐ Addition CHARLES, DAVID J NAME 2805 E. OAKLAND PARK BLVD. - PMB 449 STREET ADDRESS STREET ADDRESS City-ST-ZIP FORT LAUDERDALE, FL 33306 CITY - ST - ZIP TITLE VD Delete ☐ Change ☐ Addition SABERG, CAROLYN NAME NAME 2005 NE 21ST STREET STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP FORT LAUDERDALE, FL 33305 Change **V**D Delete TITLE ☐ Addition TITLE YALEN, DAVIO 2840 S. OAKLAND FULLEST DE # 2801 YALEN, DAVID NAME NAME STREET ADDRESS 110 NO. FEDERAL HWY #901 STREET ADDRESS FORT LAUDENDALE, EL 33309 CITY-ST-ZIP FORT LAUDERDALE, FL 33301 CITY-ST-ZIP ☐ Change TITLE SD Delete TITLE ☐ Addition CHRISTOPHER, DOOREEN NAME NAME 3100 NE 49TH STREET #106 STREET ADDRESS STREET ADDRESS

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

CITY-ST-ZIP

SIGNATURE:

FORT LAUDERDALE, FL 33308

DI CHALLES SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

954-566-4200 2 -1- 2007

FILED Feb 05, 2007 8:00 am