


FILE NOW: FILING FEE IS \$61.25

FILED

**Feb 10 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 736325 (2)

1. Corporation Name
BOYNTON BEACH JEWISH CENTER BETH KODESH, INC.



Principal Place of Business 501 NE 26TH AVE BOYNTON BCH FL 33435	Mailing Address 501 NE 26TH AVE BOYNTON BCH FL 33435
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3. Date Incorporated or Qualified 07/08/1976		
4. FEI Number 59-1680041	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent

**JACK SIEGEL
10069 B ANDREA LANE
BOYNTON BCH, FL
BOYNTON BEACH FL 33437**

10. Name and Address of New Registered Agent

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

11. Pursuant to the provisions of 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 617.0503, Florida Statutes.

SIGNATURE *Jack Siegel* DATE 2/4/98

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	<input checked="" type="checkbox"/> DELETE	1.1 TITLE PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BRINDLIS, GEORGE		1.2 NAME Joseph Mayerson	
STREET ADDRESS 5272 PIPING ROCK DRIVE		1.3 STREET ADDRESS 2615 NE 3 Ct. #117	
CITY-ST-ZIP BOYNTON BEACH FL		1.4 CITY-ST-ZIP Boynton Beach, Fl. 33435	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VPD	<input checked="" type="checkbox"/> DELETE	2.1 TITLE VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MAYERSON, JOE		2.2 NAME Irwin Hochman	
STREET ADDRESS 2615 NE 3RD COURT, #117		2.3 STREET ADDRESS 130 N.E. 26 Ave #104	
CITY-ST-ZIP BOYNTON BEACH FL		2.4 CITY-ST-ZIP Boynton Beach, Fl. 33435	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VPD	<input checked="" type="checkbox"/> DELETE	3.1 TITLE VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME HOCHMAN, IRWIN		3.2 NAME Al Kass	
STREET ADDRESS 130 NE 26TH AVENUE, # 104		3.3 STREET ADDRESS 5231 Brookview Drive	
CITY-ST-ZIP BOYNTON BEACH FL		3.4 CITY-ST-ZIP Boynton Beach, Fl. 33437	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE TD	<input type="checkbox"/> DELETE	4.1 TITLE TD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME SIEGEL, JACK		4.2 NAME JACK SIEGEL	
STREET ADDRESS 1069 B ANDREA LANE		4.3 STREET ADDRESS 1069 B ANDREA LANE	
CITY-ST-ZIP BOYNTON BEACH FL		4.4 CITY-ST-ZIP BOYNTON BEACH FL	
TITLE SD	<input checked="" type="checkbox"/> DELETE	5.1 TITLE SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME KASS, WILMA		5.2 NAME Shirley Dix	
STREET ADDRESS 5231 BROOKVIEW DRIVE		5.3 STREET ADDRESS 2615 NE 1 Ct.	
CITY-ST-ZIP BOYNTON BEACH FL		5.4 CITY-ST-ZIP Boynton Beach, Fl. 33435	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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: *Jack Siegel* *Jack Siegel* *1069 B Andrea Lane* *Boynton Beach, FL 33437*

CR2E037 (1097)