

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753043

FILED  
Jan 22, 2007  
Secretary of State

Entity Name: HAVURAH OF SOUTH FLORIDA, INC.

## Current Principal Place of Business:

7800 RED ROAD  
215 E  
SOUTH MIAMI, FL 33143 US

## New Principal Place of Business:

## Current Mailing Address:

5059 SW 71 PL  
MIAMI, FL 33155

## New Mailing Address:

FEI Number: 59-2011883

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KAPLOWITZ, ELLEN  
10380 SW 93 STREET  
MIAMI, FL 33176 US

## Name and Address of New Registered Agent:

LEE, NELLIE  
6666 SW 115 STREET  
APT #203  
MIAMI, FL 33173 US

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: PHILIP LEVY

01/22/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: KAPLOWITZ, ELLEN  
Address: 10380 SW 93 STREET  
City-St-Zip: MIAMI, FL 33176

Title: V ( ) Delete  
Name: LEE, NELLIE  
Address: 6666 SW 115 STREET, APT #203  
City-St-Zip: MIAMI, FL 33173

Title: T ( ) Delete  
Name: LEVY, PHILIP  
Address: 5059 SW 71 PLACE  
City-St-Zip: MIAMI, FL 33155

Title: S ( ) Delete  
Name: FALLOWES, LINDA  
Address: 10117 SW 77 COURT  
City-St-Zip: MIAMI, FL 33156

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: LEE, NELLIE  
Address: 6666 SW 115 STREET, APT #203  
City-St-Zip: MIAMI, FL 33173

Title: V (X) Change ( ) Addition  
Name: WINDMILLER, SUSAN  
Address: 10001 SW 133 STREET  
City-St-Zip: MIAMI, FL 33176

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PHILIP LEVY

T

01/22/2007

Electronic Signature of Signing Officer or Director

Date