JUL-23-98 THU 7:36

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Jul 30 1998 8:00am
Secretary of State

FROM : Temple Judea PHONE NO. : 305 665 58

AMOUNT DUE ON OR BEFORE 05/30/98 $61.25 (IF DISSOLVED...)

NONPROFIT CORPORATION ANNUAL REPORT 1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 757375 (1)

1. Corporation Name

TEMPLE SHIR AMI, INC.

[redacted]

Principal Place of Business: ~~7205 SW 125 AVE MIAMI FL 33183~~ 5500 GRANADA BLVD CORAL GABLES, FL 33146

Mailing Address: ~~7205 SW 125 AVE MIAMI FL 33183~~ 12900 SW 84 ST MIAMI, FL 33183

3. Date Incorporated or Qualified: 04/02/1981

4. FEI Number: 59-2105581

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

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☑ No

8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☑ No

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

9. Name and Address of Current Registered Agent

~~CORPORATION SERVICE COMPANY~~
~~1201 HAYS STREET~~
~~TALLAHASSEE FL 32301~~
MILES MOSS
12900 SW 84 ST
MIAMI, FL 33183

10. Name and Address of New Registered Agent

31 Name: MILES E MOSS
32 Street Address (P.O. Box Number is Not Acceptable): 12900 SW 84 ST
33 City: MIAMI, FL 33183
34 FL

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 [signature] 7/23/98

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
TITLE	DT	☐ DELETE	1.1 TITLE ☐ Change
NAME	MOSS, MILES		1.2 NAME
STREET ADDRESS	7205 SW 125 AVE		1.3 STREET ADDRESS
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP
TITLE	DV	☐ DELETE	2.1 TITLE ☐ Change
NAME	STEIN, MARVIN		2.2 NAME
STREET ADDRESS	11411 SW 131 AVE		2.3 STREET ADDRESS
CITY-ST-ZIP	MIAMI FL 33186		2.4 CITY-ST-ZIP
TITLE	DT	☐ DELETE	3.1 TITLE ☐ Change
NAME	RODRIGUEZ, MIRIAM		3.2 NAME
STREET ADDRESS	8704 SW 114 PL CT		3.3 STREET ADDRESS
CITY-ST-ZIP	MIAMI FL 33173		3.4 CITY-ST-ZIP
TITLE		☐ DELETE	4.1 TITLE ☐ Change
NAME			4.2 NAME
STREET ADDRESS			4.3 STREET ADDRESS
CITY-ST-ZIP			4.4 CITY-ST-ZIP
TITLE		☐ DELETE	5.1 TITLE ☐ Change
NAME			5.2 NAME
STREET ADDRESS			5.3 STREET ADDRESS
CITY-ST-ZIP			5.4 CITY-ST-ZIP
TITLE		☐ DELETE	6.1 TITLE ☐ Change
NAME			6.2 NAME
STREET ADDRESS			6.3 STREET ADDRESS
CITY-ST-ZIP			6.4 CITY-ST-ZIP

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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: [signature] 7/23/98

MILES E MOSS