## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

SIGNATURE: \_\_

763397

1. Corporation	MENT # 763397 LE B'NAI SHALOM INC.	7 (7)		I IRANIH FRANK ANIKA NINA NINA NINA NOKA ANIKA ANIKA ANIKA RIBAH ANIKA ANIKA ANIKA ANIKA ANIKA ANIKA BURAH ANI	
Principal Place	of Rusinose	Mollos Addenso			
,		Mailing Address			
3501 WEST DR. DEERFIELD BCH FL 33442 US		3501 WEST DRIVE DEERFIELD BCH FL 33442 US			
				3. Date Incorporated or Qualified 3a. Date of Last Report 05/21/1982 03/02/1995	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number Applied Fo	
21		26		59-2191581 Not Applica	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional	
City & State	A	City & State		Fee Hequired	
23	S	28		6. Election Campaign Financing Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country	This corporation has liability for intangible tax under s. 199,032,	
24	25	29	30	Florida Statutes	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent	
			81 Name		
	BEATRICE G		82 Street	Address (P.O. Box Number is Not Acceptable)	
	ambridge d Eld Beach FL 33442		83		
DECNI	ELD BEACH PL 33442				
			84 City	FL 85 Zip Code	
or register familiar wit SiGNATURE	red agent, or both, in the State of Florick th, and accept the obligations of, Section Signature 1556d or printed name of registered agent a	iri 617.0503, Florida Statutes	ed by the corporation's  TE: Registered Agent signature re	orporation submits this statement for the purpose of changing its registered of board of directors. Thereby accept the appointment as registered agent. Far	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TIPLE	D/P	DELETE	1.1 TITLE	☐ Change ☐ Additi	
NAME DZOSCE LODOCOO	FRIEDMAN, LEONARD		1.2 NAME		
STREET ADDRESS CITY - ST - ZIP	LYNHURST DEERFIELD BEACH FL 33442		1.3 STREET ADDRESS		
TITLE	P	<b>X</b> ]DELETE	1 4 CITY - ST - ZIP 2 1 TITLE	P ⊠ Change ☐ Additi	
NAME	GREENBERG, HAROLD	<i>F</i> -	2.2 NAME	BAUMANN, HELEN 2029 LYNDHURST J DECRETCH BCH, FL. 33442.	
STREET ADDRESS	408 RICHMOND A		2 3 STREET ADDRESS	2029 LYNDHURST J	
CITY - ST - ZIP	DEERFIELD BCH FL		2 4 CITY - ST - ZIP	DEGRETCH BCH, FL. 33442.	
TITLE	D	DELETE	3 1 TITLE	WOLFF BETTY Change Addition	
NAME	MORRISON, SIDNEY		3.2 NAME	4053 NEWPORT N	
STREET ADDRESS	OAKRIDGE D 1023		3.3 STREET ADDRESS		
DIZY-ST-ZIP TITLE	DEERFIELD BCH, FL 00000	DELÈTE	3.4 CITY ST-ZIP	DEGRETULD ACH, FL. 334Y2-	
NAME	SENNABAUM, JUNE	Поссет	4 1 TITLE 4 2 NAME	☐ Change ☐ Add⊰ii	
STREET ADDRESS	18771-4 STEWART CIRCLE		4.3 STREET ADDRESS		
CITY-ST-ZiP	BOCA RATON FL		4.4 CITY - S1 - ZIP		
TITLE	TD	DELETE	5 1 TITLE	Change Additive	
NAME	BEATRICE, LITNER		5 2 NAME		
STREET ADDRESS	CAMBRIDGE D 2064		5 3 STREET ADDRESS		
DITY - ST - ZIP	DEERFIELD BEACH, FL 33442	[ hoorer	5 4 CITY - ST - ZIP		
TITLE	V METZI WALTED	DEFELE	61 TITLE	Change Addition	
NAME STREET ADORESS	METZL, WALTER ISLEWOOD D 1015		6.2 NAME		
CITY-ST-ZIP	DEERFIELD BCH FL		6.3 STREET ADDRESS		
14. I do hereby	v certify that the information supplied wi	th this filing is voluntarily furn	64 CITY-ST-ZIP ished and does not qual	lify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further	
oath; that I	The information indicated on this annua	l report or supplemental anni ition or the receiver or trustee	ual report is true and acc empowered to execute	curate and that my signature shall have the same legal effect as if made under this report as required by Chapter 617, Florida Statutes; and that my name	

Beature 4. Litnes 17 REAS 2/13/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 17 REAS 2/13/96

305-428-6297