FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



SIGNATURE: Clausie Glad , PRECUITIED

FLORIDA DEPARTMENT OF STATE

FILED

Feb 06 1997 8:00am

Secretary of State

1/28/97 30 6741326

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 763961

(0)

OHR CHAIM CONGREGATION, INC.

Orat C								
Principal Place	e of Business	Mailing Address					(A)	
317 W 47 STRE MIAMI BEACH F		317 W 47 STREET MIAMI BEACH FL 33140-3129						
						3. Date Incorporated or Qualified 06/29/1982	3a. Date of Last R 04/18/19	
─ `	ace of Business	2a. Mailing Address				4. FEI Number 59-2202972		plied For
Suite, Apt.	# oto	Suite, Apt. #, etc.				itot i ppilodolo		
22	#, ERG.	27				5. Certificate of Status Desired Fee Required		
City & State)	City & State				6. Election Campaign Financing \$5.00 May Be		
23		28				Trust Fund Contribution Added to Fees		
Zip				1		8. This corporation has liability for intangible tax under s. 199.032,		
24	25 9. Name and Address of Curre	nt Pagistared Agent	30			Florida Statutes Yes No 10. Name and Address of New Registered Agent		
	9, Hairie Bho Address of Curte	ii nagistered Agent		B1 N	Name	10. Name and Appress of New Reg	Jistered Agent	
DIDAIDAI	JM, MARC							
	ISCAYNE BLVD., #400		82 Street Addre			ress (P.O. Box Number is Not Acceptable	e)	
MIAMI FI				83				
				B4 (City	·	85 Zip (Code
44 Divisional	to the pre-delene of Captions C17 05	00 C17 1500 Fir-id- Cut.	4 41					
office or re agent. I ar	egistered agent, or both, in the State m familiar with, and accept the oblig	D2 and 617.1508, Florida Statu ⇒ of Florida. Such change was yations of, Section 617.0503, F	ites, the ar authorize lorida Stat	oove-n d by th utes.	amed corp ie corporat	poration submits this statement for the pution's board of directors. I hereby accept	rpose of changing it the appointment as	registered
SIGNATURE _								
12.	Signature, typed or printed name of registered ag OFFICERS AN	IPPLY AND THE IT APPLICABLE. (NO. INC. INC. INC. INC. INC. INC. INC. INC	13.	Agent s	ignature requir	red when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE ERS AND DIRECTOR	PS INI 12
TITLE	PD	DELETE					Change	Addition
NAME	COLD, Z VI		1.2 NAM		PD	luck mauricio		
STREET ADDRESS	4475-NAUTILUS-DR		1.3 \$1		DRESS 4	Gluck, Mauricio 4510 Pine Tree Dr. Mianu Beach, FL 33140		
CITY-ST-ZIP	MIAMI BEACH FL	1.40		TY-ST-2	11P	Mianu Beach, FL 3314	0	
TITLE	VP .	☐ DELETE 2.1		TLE			Change	☐ Addition
NAME	POMPER, MARK			ME				
STREET ADDRESS	4541 ADAMS AVE			2.3 STREET ADDRESS				
CITY - ST - ZIP	MIAMI BEACH FL			ITY-\$T-7	ZIP			
TITLE			3.1 11				L Change	Addition
NAME	RUBIN, ABBY		3.2 N					
STREET ADDRESS	4580 N. MERIDIAN AVE MIAMI BEACH FL			REET ADI				
CITY-ST-ZIP TITLE	TD	DELETE	9.4. C	ITY-ST-Z			Change	Addition
NAME	YAR M S, GARY		4.2 N			D leane Gard	7	L Flooriton
STREET ADDRESS	4564 N. MICHIGAN			REET AD	DRESS . 2	arus, Gary 330 W. 45 J. St.		
CITY-ST-ZIP	MIAMI BEACH FL 33140			TY-ST-Z		miani Beach, FL 3314	0	
TITLE		DELETE	5.1 11				☐ Change	Addition
NAME			5.2 N/	ME				
STREET ADDRESS			5.3 \$1	REET AD	ORESS			
CITY-ST-ZIP	·		5.4 CI	TY-ST-Z	'IP			
TITLE		☐ DELETE	6.1 Ti	TLE			☐ Change	Addition
NAME			6.2 N	ME		÷		
STREET ADDRESS			6.3 ST	REET AD	DRESS 1			
CITY-ST-ZIP	w partify that the information records	ad with this filing does not ave		TY-ST-Z		d in Section 119.07(3)(i), Florida Statutes	I further could a street	the
informatio I am an of	n indicated on this annual report or	supplemental annual report is or the receiver or trustee empore	true and a wered to e	accurat	te and that	a in Section 19.07(3)(i), Florida Statutes i my signature shall have the same legal 1 as required by Chapter 617, Florida St	effect as if made une	der oath: that