

**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 10, 2005  
Secretary of State**

DOCUMENT# 769333

Entity Name: BETH JACOB HIGH SCHOOL, INC.

**Current Principal Place of Business:**

**New Principal Place of Business:**

1110 N.E. 163 ST.  
N. MIAMI BCH, FL 33162 US

**Current Mailing Address:**

**New Mailing Address:**

1110 N.E. 163 ST.  
N MIAMI BCH, FL 33162 US

FEI Number: 59-2335606      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

SOSTCHIN, GUILLERMO  
1415- 20TH ST #402  
MIAMI BEACH, FL 33140 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VTD ( ) Delete  
Name: SOSTCHIN, HENRIETTA  
Address: 1415- 20TH ST #402  
City-St-Zip: MIAMI BEACH, FL 33139

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

Title: CPD ( ) Delete  
Name: SOSTCHIN, GUILLERMO  
Address: 1415- 20TH ST #402  
City-St-Zip: MIAMI BEACH, FL 33139

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

Title: D ( ) Delete  
Name: LAMPERT, ARI  
Address: 4465 MERIDIAN AVE  
City-St-Zip: MIAMI BEACH, FL

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

Title: D ( ) Delete  
Name: LEIZERSON, EPHRAIM,  
Address: 670 NE 176 ST  
City-St-Zip: N MIAMI BEACH, FL

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 Section 119.07(3)(i), 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: HENRIETTA SOSTCHIN

VTD

01/10/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date