2007 NOT-FOR-PROFIT CORPORATION. ANNUAL REPORT (AR)

DOCUMENT # C94000000004 Mar 26, 2007 08:00 AM 1. Entity Namo **Secretary of State** BETH ISRAEL CONGREGATION Principal Place of Business Mailing Address 770 WEST 40TH STREET 770 WEST 40TH STREET MIAMI BEACH FL 33140 MIAMI BEACH FL 33140 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suito, Apt. #. etc. Suite Apt # old 1st MOORE CR2E037 (10/06) City & State City & State 4. FEI Number Applied For 59-0823935 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desirod Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo GALBUT, ABRAHAM 3559 PINE TREE DR Stroot Addross (P.O. Box Number is Not Acceptable) MIAMI BEACH FL 33140 Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and fitte if applicable. (NOTE: Registered Agent aigneture required whon reinstailing) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be Trust Fund Contribution. Due By May 1, 2007 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 IIIŒ Delete THIT ☐ Change ■ Addition NAME GALBUT, ABRAHAM NAME U00000680256 04/03/07-90068-021 61.25 STREET ADDRESS 3559 PINE TREE DR STREET ADDRESS CITY-ST-ZIP CITY-SI-7P MIAMI BEACH FL 33140 Addition TILLE Delete TITUE. Change NAME MORSE, MARC NAME STREET ADDRESS 4515 N. MERIDIAN AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI BEACH FL 33140 TITLE ☐ Delete TITLE Change Addition NAME NAME FROHLICH, SETH STREET ADDRESS 3126 PINE TREE DR STREET ADDRESS CITY - ST- 7(P CITY-ST-ZIP MIAMI BEACH FL 33140 TITLE ☐ Delete TITLE Change Addition NAME ROTENBERG, DANIEL NAME STREET ADDRESS STREET ADDRESS 4545 ADAMS AVE CITY-ST-ZIP CITY-ST-ZIP MIAMI BEACH FL 33140 Delete DHE Change Addition NAME **GUTTMANN, EUGENE** NAME STREET ADDRESS STREET ADDRESS 5001 COLLINS AVE #10F CITY ST-ZIP MIAMI BEACH FL 33140 CITY-ST-ZIP TITLE ВМ Delete THILE Change Addition NAME WIEN, LEONARD NAME STREET ADDRESS 3005 FLAMINGO DR STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP MIAMI BEACH FL 33140

12. I hereby cortify that the information supplied with this illing does not qualify for the exemptions contained in Section 119, Florida Statutos. I further ccritify that the information indicated on this report or supplemental report is frue and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or frustee emptwered to execute this report as required by Chapter 617, Florida Statutos; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with the information in the inf

SIGNATURE:

3/21/07 305 354-5297

FILED