## 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# C9400000004

**Entity Name: BETH ISRAEL CONGREGATION** 

Oct 30, 2009 Secretary of State

770 WEST 40TH STREET US MIAMI BEACH, FL 33140

**Current Mailing Address: New Mailing Address:** 

770 WEST 40TH STREET MIAMI BEACH, FL 33140 US

FEI Number: 59-0823935 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:

GALBUT, ABRAHAM 3559 PINE TREE DR

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: ABRAHAM GALBUT

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

GALBUT, ABRAHAM GALBUT, DAVID Name: Name:

3559 PINE TREE DR Address: 4730 NORTH BAY ROAD Address: City-St-Zip: MIAMI BEACH, FL 33140 US City-St-Zip: MIAMI BEACH, FL 33140 US

Title: () Delete Title: () Change () Addition

Name: MORSE, MARC Name: Address: 4515 N. MERIDIAN AVE Address: City-St-Zip: MIAMI BEACH, FL 33140 US City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition

FROHLICH, SETH Name: FROHLICH, SETH Name: 3126 PINE TREE DR Address: Address: 3126 PINE TREE DR City-St-Zip: MIAMI BEACH, FL 33140 US City-St-Zip: MIAMI BEACH, FL 33140 US

Title: ( ) Delete Title: () Change () Addition

Name: ROTENBERG, DANIEL Name: Address: 4545 ADAMS AVE Address: City-St-Zip: MIAMI BEACH, FL 33140 US City-St-Zip:

Title: BM () Delete Title: () Change () Addition

GUTTMANN, EUGENE Name: Name: 5001 COLLINS AVE #10F Address: Address: City-St-Zip: MIAMI BEACH, FL 33140 City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition

WIEN, LEONARD KLEIN. STEVEN Name: Name: Address: 3005 FLAMINGO DR Address: 875 W 46 STREET MIAMI BEACH, FL 33140 MIAMI BEACH, FL 33140 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: STEVEN KLEIN S 10/30/2009