

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 30, 2004  
Secretary of State**

DOCUMENT# F00000000814

Entity Name: BNAI ZION FOUNDATION, INC.

**Current Principal Place of Business:**

4400 N. FEDERAL HWY #204  
BOCA RATON, FL 33431

**New Principal Place of Business:**

**Current Mailing Address:**

4400 N. FEDERAL HWY #204  
BOCA RATON, FL 33431

**New Mailing Address:**

FEI Number: 13-2572288      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

RUDICK, SUZANNE J  
4400 N. FEDERAL HWY. #204  
BOCA RATON, FL 33431      US

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

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:**

Title: AT      ( ) Delete  
Name: VOGELMAN, DONALD H  
Address: 15 TURNER DRIVE  
City-St-Zip: NEW ROCHELLE, NY 10804

Title: EV      ( ) Delete  
Name: PARNESS, MEL  
Address: 200 WINSTON DR #1020  
City-St-Zip: CLIFFSIDE PARK, NJ 07010

Title: S      ( ) Delete  
Name: GRUNSPAN, JACK  
Address: 59 DIAMOND DR  
City-St-Zip: PLAINVIEW, NY 11803

Title: T      ( ) Delete  
Name: IGNAL, AARON  
Address: 216-39 28TH RD  
City-St-Zip: BAYSIDE, NY 11360

Title: P      ( ) Delete  
Name: LAZAR, MICHAEL J  
Address: 575 PARK AVE #107  
City-St-Zip: NEW YORK, NY 10021

Title: C      ( ) Delete  
Name: SCHAEFFER, GEORGE W  
Address: 612 N. MAPLE DR  
City-St-Zip: BEVERLY HILLS, CA 90210

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

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

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

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

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

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

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: MEL PARNESS

EV

04/30/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date