

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001873

FILED
Jul 02, 2007
Secretary of State

Entity Name: ONE FAMILY FUND-ISRAEL EMERGENCY SOLIDARITY FUND, INC.

Current Principal Place of Business:

300 FRANK W. BURR BLVD.
TEANECK, NJ 07666

New Principal Place of Business:

Current Mailing Address:

2627 NE 203RD STREET
SUITE 111
AVENTURA, FL 33180

New Mailing Address:

FEI Number: 11-3585917 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

JANKOVITS, MIRIAM
2627 NE 203RD STREET
SUITE 111
AVENTURA, FL 33180 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: C () Delete
Name: BELZBERG, MARC
Address: POB 45002, BYNET BUILDING
City-St-Zip: JERUSALEM ISRAEL 91450,

Title: V () Delete
Name: BELZBERG, CHANTAL
Address: POB 45002, BYNET BUILDING
City-St-Zip: JERUSALEM ISRAEL 91450,

Title: D () Delete
Name: RICHARDS, ADAM
Address: 300 FRANK W. BURR BLVD
City-St-Zip: TEANECK, NJ 07666

Title: D () Delete
Name: JANKOVITS, MIRIAM
Address: 2627 NE 203RD STREET, SUITE 111
City-St-Zip: AVENTURA, FL 33180

Title: V () Delete
Name: ENNIS, LORELEI
Address: 3455 STALLION LANE
City-St-Zip: WESTON, FL 33331

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:

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: ADAM RICHARD

DOO

07/02/2007

Electronic Signature of Signing Officer or Director

Date