## 2000 UNIFORM BUSINESS REPORT (UBR)

## **FILED** DOCUMENT # F93000003291 May 16, 2000 8:00 am Secretary of State AMERICAN JEWISH WORLD SERVICE, INC. 05-16-2000 90097 022 \*\*\*\*70.00 Principal Place of Business Mailing Address 989 SIXTH AVENUE 989 SIXTH AVENUE 10TH FLOOR 10TH FLOOR NEW YORK NY 10018 NEW YORK NY 10018 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 22-2584370 Not Applicable Zip Country Country **\$8.75** Additional 5. Certificate of Status Desired **₹**□ Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) BAROVICK, RICHARD L 2197 NW 60 ROAD 13693 RIVIOLI DRIVE Zip Code City PALM BCH GDNS FL 33410 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE **FILE NOW:** 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to Trust Fund Contribution. FEE IS \$61.25 Added to Fees **Department of State** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE Delete TITLE Change ☐ Addition NAME ABRAMSON, DONALD M NAME STREET ADDRESS STREET ADDRESS 220 BUSH ST. SUITE 580 CITY-ST-ZIP CITY-ST-ZIP <u>SAN FRANCISCO CA 94104</u> Addition TITLE □ Delete TITLE Change NAME WIENER, LAWRENCE S NAME STREET ADDRESS STREET ADDRESS 123 S. WILLIAMAN DR. CITY-ST-7IP CITY-ST-7IP <u>BEVERLY HILLS CA 90211</u> Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME friedman. Martin STREET ADDRESS 200 EAST 33RD ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY 10016 Change ☐ Addition TITLE ☐ Delete TITLE Messinger, Ruth W STREET ADDRESS STREET ADDRESS 91 CENTRAL PARK WEST CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY 10023 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME amstein, joel STREET ADDRESS STREET ADDRESS WORLD EDUCATION 210 LINCOLN STREET CITY-ST-ZIP CITY-ST-ZIP BOSTON MA 02111 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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 supported to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

RE REQUESTON.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

Messinger

Daytime Phone #