

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 30, 2001 8:00 am
Secretary of State

05-30-2001 90030 008 ****70.00

DOCUMENT # F93000003291

1. Entity Name

AMERICAN JEWISH WORLD SERVICE, INC.

Principal Place of Business

989 SIXTH AVENUE
 10TH FLOOR
 NEW YORK NY 10018
 US

Mailing Address

989 SIXTH AVENUE
 10TH FLOOR
 NEW YORK NY 10018
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

22-2584370

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BAROVICK, RICHARD L
2197 NW 60 ROAD
13693 RIVOLI DRIVE
PALM BCH GDNS FL 33410

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

(NOT: Registered Agent signature required when reinstating)

DATE

FILE NOW
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **C** ☐ Delete
 NAME **ABRAMSON, DONALD M**
 STREET ADDRESS **220 BUSH ST, SUITE 580**
 CITY-ST-ZIP **SAN FRANCISCO CA 94104**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **ST** ☐ Delete
 NAME **WIENER, LAWRENCE S**
 STREET ADDRESS **123 S. WILLIAMAN DR.**
 CITY-ST-ZIP **BEVERLY HILLS CA 90211**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **TT** ☐ Delete
 NAME **FRIEDMAN, MARTIN**
 STREET ADDRESS **200 EAST 33RD ST.**
 CITY-ST-ZIP **NEW YORK NY 10016**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **P** ☐ Delete
 NAME **MESSINGER, RUTH W**
 STREET ADDRESS **91 CENTRAL PARK WEST**
 CITY-ST-ZIP **NEW YORK NY 10023**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☐ Delete
 NAME **LAMSTEIN, JOEL**
 STREET ADDRESS **WORLD EDUCATION 210 LINCOLN STREET**
 CITY-ST-ZIP **BOSTON MA 02111**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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 empowered 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.

SIGNATURE:

SIGNATURE REQUIRED
Ruth W. Messinger

3-28-01

(212) 736-3430

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER, TRUSTEE, OR DIRECTOR

CR2E037 (10/00)