

*Haifa Medical  
Development Fund*

IN SUPPORT OF  
BNAI ZION MEDICAL CENTER



**F95000003137**

August 12, 1999

Under the auspices of  
Minister of Health  
Government of Israel  
Municipality of Haifa  
In affiliation with  
The Faculty of Medicine  
The Technion

Mr. Bob Crawford, Commissioner of Agriculture  
Department of Agriculture & Consumer Services  
Solicitation of Contributions  
PO BOX 6700  
Tallahassee, FL 32314-6700

President  
*Corrine Barsky*

Honorary Chairman  
*Theodore London*

Board of Directors  
*Ilana Artman*  
*Corrine Barsky*  
*Robyn Barsky*  
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*Barry Singer, MD*  
*Bijou Zelig*  
*Ernest Zelig*

Executive Director  
*Lee Sherman*

BZMC Director  
*Nachum Egoz, MD*

Dear Mr. Crawford:

300002980533--7  
-09/08/99--01005--009  
\*\*\*\*\*43.75 \*\*\*\*\*43.75

By this letter, Haifa Medical Development Fund, Inc., is informing you that it is no longer soliciting funds within the State of Florida.

By the instructions our CPA received from Mr. Daughtry of your office we are forwarding to you a copy of our 1998 FORM 990.

Please record this information in your files.

Sincerely,

*Lee Sherman*

Lee Sherman,  
Executive Director

FILED  
99 SEP -7 AM 8:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*W. Thaler*  
T. LEWIS SEP 8 1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

August 27, 1999

LEE SHERMAN  
HAIFA MEDICAL DEVELOPMENT FUND, INC.  
31 JARED DRIVE  
WHITE PLAINES, NY 10605

SUBJECT: HAIFA MEDICAL DEVELOPMENT FUND, INC.  
Ref. Number: F95000003137

We have received your document for HAIFA MEDICAL DEVELOPMENT FUND, INC. and check(s) totaling \$35.00. However, your check(s) and document are being returned for the following:

A foreign corporation authorized to transact business or conduct its affairs in Florida may withdraw its authority by completing the enclosed withdrawal application and submitting the appropriate fee.

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

If you have any questions concerning this matter, please either respond in writing or call (850) 487-6905.

Thelma Lewis  
Corporate Specialist Supervisor

Letter Number: 699A00043093

RECEIVED  
99 SEP -7 AM 8:39  
DIVISION OF CORPORATIONS

*Enclosed:*

*check for \$43.75 (\$35 filing fee, \$8.75 certificate of status)*

*plus appropriate papers.*

**APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL  
OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS  
IN FLORIDA**

HAIFA MEDICAL DEVELOPMENT FUND  
(Name of Corporation)

N.Y. STATE  
(Incorporated Under Laws Of)

99 SEP 17 AM 8:56  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.

This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address to which the Department of State may mail a copy of any process against this corporation that may be served on the Department.

31 JARED DRIVE  
(Mailing Address)

WHITE PLAINS, N.Y. 10605  
(City/ State /Zip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.

Corrine Barsky  
Signature

President  
Title

CORRINE BARSKY  
Typed or printed name

9/3/99  
Date