2005 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # F98000005060

1. Entity Name



FILED Jul 05, 2005 8:00 am Secretary of State

07-05-2005 90223 015 ****61.25

Section Process Business 2. Mailing Address 2. Mailing Address 2. Principal Process 3. Mailing Address 2. Mailing Address 2. Principal Process 3. Mailing Address	AMERICAN RED MAGEN DAVID FOR ISRAEL, INC.									
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite City & State	2100 E. HAL	LANDALE BEACH BLVD., #205	2100 E. HALLANDALE BE	100 E. HALLANDALE BEACH BLVD., #205						
Suite, Apt. #, etc.										
City & State Ci	2. Principal P	lace of Business	3. Mailing Address	Mailing Address						
Source S	Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		06302005 C	ng-NP CR2E(37 (10/03)		
S. Name and Address of Current Registered Agent S. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent 8. Name and Address of New Registered Agent 8. Name and Address of New Registered Agent 9. Name and A	City & State		City & State	City & State		50 2052200				
SCHWARTZ ROBERT L 2100 E. HALLANDALE BEACH BLVD., #205 HALLANDALE, FL 33009 8. The above named entity submits this statement for the purpose of changing its registered differ or registered agent, or both, in the State of Fords. Laminarillar with, and accept the obligations of registered agent. SIGNATURE Filing Fee is \$61.25 Due by September 7, 2005 TILE NAME SIGNATURE PD SININGHAM, STEPHEN DR SININGHAM, STEP	Zip	Country	Zip	p Country			5 Certificate of Status Desired S8.75 Additional			
SCHWARTZ ROBERT L 2100 E. HALLANDALE BEACH BLVD., #205 HALLANDALE BEACH BLVD., #205 HALLANDALE FL 33009 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Company Compan		6. Name and Address of Current								
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Submit Filling Fee is \$81.25	2100 E. HALLANDALE BEACH BLVD., #205				DONIN, LORKAINE					
B. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE	TIALDAND	ALE, 1 E 30003		2100 E. HALLANDALE			ALE BCH. 1	E BCH. BLVD + 205		
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