

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000005060

FILED
Jul 03, 2007
Secretary of State

Entity Name: AMERICAN RED MAGEN DAVID FOR ISRAEL, INC.

Current Principal Place of Business:

2100 E. HALLANDALE BEACH BLVD., #205
HALLANDALE, FL 33009

New Principal Place of Business:

Current Mailing Address:

2100 E. HALLANDALE BEACH BLVD., #205
HALLANDALE, FL 33009

New Mailing Address:

FEI Number: 59-2052390 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:

ROBERT, SCHWARTZ
2100 E. HALLANDALE BEACH BLVD., #205
HALLANDALE, FL 33009 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: S () Delete
Name: KRUGLANSKI, CPA, ANDREW
Address: 7800 OAKLAND PARK BLVD. BLDG. G SUITE 121
City-St-Zip: SUNRISE, FL 33351

Title: TS () Delete
Name: PICKMAN, ARTHUR
Address: 13261 VEDRA LAKE CIR
City-St-Zip: DELRAY BEACH, FL 33446

Title: VD () Delete
Name: SOLODKIN, ERICA
Address: 3501 N. 52ND ST.
City-St-Zip: HOLLYWOOD, FL 33021

Title: C () Delete
Name: SLINGBAUM, STEPHEN
Address: 10403 SANTIAGO ST.
City-St-Zip: COOPER CITY, FL 33026

Title: PD () Delete
Name: RAFOFSKY, HARVEY
Address: 3430 N 32RD TERR
City-St-Zip: HOLLYWOOD, FL 33021

Title: D () Delete
Name: ROBERT, SCHWARTZ
Address: 17087 NW 10TH ST.
City-St-Zip: PEMBROKE PINES, FL 33028

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TS (X) Change () Addition
Name: KRUGLANSKI, CPA, ANDREW
Address: 7800 OAKLAND PARK BLVD. BLDG. G SUITE 121
City-St-Zip: SUNRISE, FL 33351

Title: S (X) Change () Addition
Name: SIMMONDS, KAREN
Address: 1032 SANDALWOOD LANE
City-St-Zip: WESTON, FL 33326

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: ROBERT SCHWARTZ

D

07/03/2007

Electronic Signature of Signing Officer or Director

Date