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FILED
Apr 18 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L42761** (1)
1. Corporation Name
**TALMUDIC COLLEGE OF FLORIDA STUDENT HOUSING 1950
-60-70 MICHIGAN AVENUE, APARTMENTS, INC.**



Principal Place of Business
**1950-60-70 MICHIGAN AVE.
MIAMI BEACH FL 33139**

Mailing Address
**1910 ALTON ROAD
MIAMI BEACH FL 33139-1507
US**

3. Date Incorporated or Qualified
01/17/1990

3a. Date of Last Report
05/01/1996

4. FEI Number
59-1571122

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

9. Name and Address of Current Registered Agent
**SOSTCHIN, GUILLERMO
1800 SW 27TH AVE., STE. 302
MIAMI FL 33145**

10. Name and Address of New Registered Agent
81 Name **IRA HILL**
82 Street Address (P.O. Box Number is Not Acceptable)
1910 Alton Rd
83
84 City **MIAMI BEACH** **FL** **85** Zip Code **33131**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]*
Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE **4/14/97**

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
P	ZWEIG, JEROME RABBI	2035 N. BAY RD.	MIAMI BEACH FL 33140	<input type="checkbox"/>
V	SIMON, MILTON RABBI	2850 PRAIRIE AVE.	MIAMI BEACH FL 33140	<input checked="" type="checkbox"/>
S	BURSTYN, JEREMIAH RABBI	4147 N. MERIDIAN AVE.	MIAMI BEACH FL 33140	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	Change	Addition
PD	ZWEIG JEROME Rabbi	2035 NBAY RD	MIAMI BEACH FL 33140	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
VDT	ZWEIG Yitzhak	2033 N BAY RD	MIAMI BEACH FL 33140	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SD	Simon Milton Rabbi	1910 Alton Rd	M.B. FL 33137	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14. I do 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 annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *[Signature]* **4/14/97** **534-7010**

CR2E034 (9/96)