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1-2

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # M76971 (4)

1. Corporation Name

SINAI FUNERAL HOME, INC.



Principal Place of Business

111 SKOKIE BOULEVARD
WILMETTE IL 60091
US

Mailing Address

%ARTHUR J. GROSSBERG
3201 NORTH 72ND AVENUE
HOLLYWOOD FL 33024-2406
US

3. Date Incorporated or Qualified
04/19/1988

3a. Date of Last Report
04/03/1995

2. Principal Place of Business

2a. Mailing Address

21 26 4126 NORLAND AVENUE

4. FEI Number

36-3590855

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

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

83 300001794773
-04/25/96--01071--026

84 City

***200.00

FL

85 Zip Code

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 typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent Signatures required after consulting)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DPT
WEINSTEIN, JOEL W.
111 SKOKIE BLVD.
WILMETTE IL

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DVS
CUTLER, NORMAN
111 SKOKIE BLVD.
WILMETTE IL

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

AS
COHN, MARVIN
55 EAST MONROE STREET
CHICAGO IL

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

AS
MCLANEY, MELISSA L.
111 SKOKIE BLVD
WILMETTE IL

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

1. TITLE C

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

ZIP = 60091

2. TITLE D

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

ZIP = 60091

3. TITLE D

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

LOEWEN, RAYMOND L.
4126 NORLAND AVENUE
BURNABY, B.C., CANADA, V5G 3S8

4. TITLE DAS

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

HYNDMAN, PETER S.
4126 NORLAND AVENUE
BURNABY, B.C., CANADA, V5G 3S8

5. TITLE P

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

WEINSTEIN, ROBERT A.
335 W. DUNDEE ROAD, #202
BUFFALO GROVE, IL 60089-3545

6. TITLE ST

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

WRIGHT, GARY L.
800-50 EAST RIVERCENTER BLVD.
COVINGTON, KY 41011

14. I do hereby certify that the information supplied on this filing is voluntarily furnished and does not qualify for the exemption stated in Section 19.07(3)(k) 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 addition with an address.

SIGNATURE:

PETER S. HYNDMAN MARCH 22, 1996 (604) 299-9321

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)

PROFIT CORPORATION ANNUAL REPORT

SINAI FUNERAL HOME, INC.

13. CONTINUED: ADDITION

7.1	TITLE:	V
7.2	NAME:	WEINSTEIN, MARK
7.3	STREET ADDRESS	111 SKOKIE BOULEVARD
7.4	CITY-ST-ZIP:	WILMETTE, IL 60091
8.1	TITLE:	V
8.2	NAME:	GROSSBERG, ARTHUR
8.3	STREET ADDRESS:	3201 N. 72ND AVENUE
8.4	CITY-ST-ZIP:	HOLLYWOOD, FL. 33024
9.1	TITLE:	AS
9.2	NAME:	BIRCH, TIMOTHY A.
9.3	STREET ADDRESS:	50 EAST RIVERCENTER BLVD.
9.4	CITY-ST-ZIP:	COVINGTON, KY 41011