

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008369

FILED
May 10, 2006
Secretary of State

Entity Name: EITZAH, INC.

Current Principal Place of Business:

C/O RABBI TERRY BOOKMAN
5950 N. KENDALL DRIVE
MIAMI, FL 33156

New Principal Place of Business:

RABBI TERRY BOOKMAN
15901 S.W. 81 AVENUE
MIAMI, FL 33157

Current Mailing Address:

C/O RABBI TERRY BOOKMAN
5950 N. KENDALL DRIVE
MIAMI, FL 33156

New Mailing Address:

RABBI TERRY BOOKMAN
15901 S.W. 81 AVENUE
MIAMI, FL 33157

FEI Number: 31-1814520 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:

AMERICAN INFORMATION SERVICES, INC.
ONE SOUTHEAST THIRD AVENUE, SUITE 2800
MIAMI, FL 33131 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: P () Delete
Name: BOOKMAN, TERRY
Address: 5950 N. KENDALL DRIVE
City-St-Zip: MIAMI, FL 33156

Title: V () Delete
Name: KAHN, WILLIAM
Address: 16 MANSON ROAD
City-St-Zip: BOSTON, MS 02494

Title: ST () Delete
Name: SOBEL, DANA
Address: 16 MANSON ROAD
City-St-Zip: BOSTON, MS 02494

Title: D () Delete
Name: SOBEL, JAMES
Address: 612 LEXINGTON WAY
City-St-Zip: BURLINGTON, CA 14010

Title: D () Delete
Name: BOOKMAN, ROBERT
Address: 7 PLAINS DRIVE
City-St-Zip: NEW CITY, NY 10956

Title: D () Delete
Name: SOBEL, KAREN
Address: 15901 SW 81ST AVENUE
City-St-Zip: MIAMI, FL 33157

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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
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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 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: TERRY BOOKMAN

P

05/10/2006

Electronic Signature of Signing Officer or Director

Date