


**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 16, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # N01000008414**

1. Entity Name  
 TORAS CHAIM DEVELOPMENT CORPORATION, INC.



Principal Place of Business  Mailing Address

C/O RABBI YISROEL NIMAN  
 1025 N.E. MIAMI GARDENS DR  
 NORTH MIAMI BEACH, FL 33179

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 1025 N.E. MIAMI GARDENS DR  
 NORTH MIAMI BEACH, FL 33179

**DO NOT WRITE IN THIS SPACE**



03012005 No Chg-NP CR2E037 (10/03)

4. FEI Number **65-1157826** Applied For  Not Applicable

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

6. Name and Address of Current Registered Agent

CHAIT, RABBI BENTZION  
 C/O YESHIVA TORAS EMES  
 1051 NORTH MIAMI BEACH BLVD  
 NORTH MIAMI BEACH, FL 33162

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

**Filing Fee is \$61.25 Due by May 1, 2005**

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

000000308788  
 04/16/05-80011-013 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	TP LAMPERT, ARON 4465 N MERIDIAN AVE M.B., FL 33140
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TV CHAIT, BENTZION RABBI 665 N.E. 175 ST N.M.B., FL 33162
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TVS NIMAN, YISROEL RABBI 4595 NAUTILUS CT M.B., FL 33140
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TT LUBAN, BINYOMEN RABBI 930 NE 175 ST N.M.B., FL 33162
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Rabbi Yisroel Y. Niman 4/13/05 305-944-5344

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #