

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01454

FILED
Sep 02, 2009
Secretary of State

Entity Name: ANSHEI LUBAVITCH, INC.

Current Principal Place of Business:

1340 MICHIGAN AVENUE
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

1340 MICHIGAN AVENUE
MIAMI BEACH, FL 33139 US

New Mailing Address:

FEI Number: 59-2374415 **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:

TEITELBAUM, RABBI ISAAC
1340 MICHIGAN AVENUE
MIAMI BEACH, FL 33139 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: PD () Delete
Name: TEITELBAUM, ISAAC
Address: 1340 MICHIGAN AVENUE
City-St-Zip: MIAMI BEACH, FL

Title: VD () Delete
Name: BRODY, AVROHOM
Address: 1761 LENOX AVENUE
City-St-Zip: MIAMI BEACH, FL

Title: SD () Delete
Name: BRONSTEIN, JOSEPH
Address: 2163 N. BAY ROAD
City-St-Zip: MIAMI BEACH, FL

Title: TD () Delete
Name: SHAPIRO, DOVID
Address: 2049 N. BAY ROAD
City-St-Zip: MIAMI BEACH, FL

Title: D () Delete
Name: RIVKIN, LAZAR
Address: 2057 N. BAY ROAD
City-St-Zip: MIAMI BEACH, FL

Title: D () Delete
Name: ROTH, YAAKOV
Address: 4386 N. MICHIGAN AVENUE
City-St-Zip: MIAMI BEACH, FL

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
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: DAVID SHAPIRO

TREA

09/02/2009

Electronic Signature of Signing Officer or Director

Date