APPROVED AND FILED

03 MAY -2 AM 5:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

55023031

03/20/03 90159 033 $70.00

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N02000000290

1. Entity Name
KEHILAT BEIT ISRAEL INC.

Principal Place of Business	Mailing Address
160 IBIS ROAD LONGWOOD, FL 32779	160 IBIS ROAD LONGWOOD, FL 32779

2. Principal Place of Business — Suite, Apt. #, etc. — City & State — Zip — Country

3. Mailing Address — Suite, Apt. #, etc. — City & State — Zip — Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number: 300026506 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MONT, JOSE L
857-C SKY LAKE CIRCLE
ORLANDO, FL 32809

NEW ADDRESS:
160 IBIS ROAD
LONGWOOD FL 32779

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City — FL — Zip Code

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 ______ DATE

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

10. OFFICERS AND DIRECTORS

Title	Name	Street Address	City-St-Zip	Delete
PD	MONT, JOSE L	857-C SKY LAKE CIRCLE	ORLANDO, FL 32809	☐
VD	CARDONA, RANDY	8213 SUN SPRINGS CIRCLE, #61	ORLANDO, FL 32825	☑
SD	CARTER, MIGDALIA	12906 W COONIAL DRIVE	WINTER GARDEN, FL 34787	☐
TD	DIAZ, ELIAS	411 ALLSPICE COURT	POINCIANA, FL 34759	☑
				☐
				☐

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

Title	Name	Street Address	City-St-Zip	Change	Addition
P.D	MONT, JOSE L	160 IBIS ROAD	LONGWOOD FL 32779	☑	☐
S/T/D	CARTER, MIGDALIA	160 IBIS ROAD	LONGWOOD FL 32779	☑	☐
D	LOPEZ, MARSHALL	203 MEADOW HILLS DR.	SANFORD FL 32773	☐	☑
D	LOPEZ, GEORGE	203 MEADOW HILLS DR.	SANFORD FL 32773	☐	☑
D	CARTER, DANNY G.	160 IBIS ROAD	LONGWOOD FL 32779	☐	☑
				☐	☐

CR2E037 (10/02)

12. I 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 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: [signature] 3-14-2003
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR — Date — Daytime Phone #

JOSE L MONT