2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000341

Entity Name: MOUNT SINAI MESSIANIC SYNAGOGUE, INC.

FILED Jan 14, 2004 Secretary of State

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Current P	rincipal Place	of Business:	New Princ	New Principal Place of Business:		
C/O MICHAEL STEPAKOFF 8370 W, HILLSBOROUGH AVENUE SUITE 201 TAMPA, FL 33615			2672 BAYS	C/O MICHAEL STEPAKOFF 2672 BAYSHORE BLVD. DUNEDIN, FL 34698		
Current M	lailing Addres	s:	New Maili	ng Address:		
	AEL STEPAKO ILLSBOROUGH L 33615					
FEI Number: 14-1868001 FEI Number Applied F		FEI Number Applied For ()) FEI Number Not Applicable ()		ertificate of Status Desired ()	
Name and	l Address of C	urrent Registered Agent:	Name and	Address of Nev	v Registered Agent:	
	PFF, MICHAEL (ILLSBOROUGH L 33615					
	e named entity s e of Florida.	ubmits this statement for the p	purpose of changing i	ts registered offic	e or registered agent, or both,	
SIGNATUR	RE:					
	Electroni	c Signature of Registered Ag	ent		Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	STEPAKOFF, M	OROUGH AVE STE 208	Title: Name: Address: City-St-Zip:	() Ch	nange () Addition	
Title: Name: Address: City-St-Zip:	D () MONSKY, STUA 10901 COVEY C TAMPA, FL 336	т	Title: Name: Address: City-St-Zip:	D (X) CH MINSKY, STUART 10901 COVEY CT TAMPA, FL 33625	nange()Addition	
Title: Name: Address: City-St-Zip:	D () ADLER, MARTIN 1550 LANEY DR PALM HARBOR,		Title: Name: Address: City-St-Zip:	() Ch	nange () Addition	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	D () CH FRADY,, CHUCK 5113 ARBOR POIN TAMPA,, FL 3361		
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: Citv-St-Zip:	STEPAKOFF, TAR	ROUGH AVE., STE. 208	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MICHAEL STEPAKOFF PRES 01/14/2004