

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009604

FILED  
Jul 03, 2006  
Secretary of State

**Entity Name:** THE VAAD HAKASHRUS OF MIAMI-DADE, INC.

**Current Principal Place of Business:**

PO BOX 403225  
MIAMI BCH, FL 331401225

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 403225  
MIAMI BCH, FL 331401225

**New Mailing Address:**

**FEI Number:** 56-2423634      **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:**

**Name and Address of New Registered Agent:**

LEVINE, JACK  
16855 NE 2 AVE STE 303  
N MIAMI BCH, FL 33162      US

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: DP      ( ) Delete  
Name: HOLLANDER, ARI  
Address: 4525 N MERIDIAN AVE  
City-St-Zip: MIAMI BCH, FL 33140

Title: DST      ( ) Delete  
Name: FROHLINGER, STANLEY  
Address: 4550 N JEFFERSON AVE  
City-St-Zip: MIAMI BCH, FL 33140

Title: DVP      ( ) Delete  
Name: RUBIN, JONATHAN  
Address: 4541 N. BAY RD.  
City-St-Zip: MIAMI BEACH, FL 33140

Title: D      ( ) Delete  
Name: ROTTMAN, MICHAEL  
Address: 1033 WEST 47TH STREET  
City-St-Zip: MIAMI BEACH, FL 33140

Title: D      ( ) Delete  
Name: BELEFER, BENJAMIN  
Address: 1321 NW 14 ST STE 202  
City-St-Zip: MIAMI, FL 33125

Title: D      ( ) Delete  
Name: SMILOW, SHLOIMY  
Address: 4465 SHERIDAN AVENUE  
City-St-Zip: MIAMI BEACH, FL 33140

**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: D      (X) Change ( ) Addition  
Name: PEPPARD, TUVIA  
Address: 4350 JEFFERSON AVE  
City-St-Zip: MIAMI BEACH, FL 33140

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: ARI HOLLANDER

DP

07/03/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date