2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 13, 2007
Secretary of State

DOCUMENT# N03000000336

Entity Name: CHAI SENIORS, INC.

Current Principal Place of Business:

788 E HALLANDALE BEACH BLVD
HALLANDALE, FL 33009

New Principal Place of Business:

Current Mailing Address:

1835 NE MIAMI GARDENS DR
359
NORTH MIAMI BEACH, FL 33179

New Mailing Address:

1835 NE MIAMI GARDENS DR278-60
HALLANDALE, FL 33009

FEI Number: 46-0519603 **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:

BRYN, USHER
2999 N.E. 191ST STREET
PENTHOUSE SIX
AVENTURA, FL 33180 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: D ( ) Delete
Name: KIEVMAN, MOSHE
Address: 219 NE 14TH AVENUE #301
City-St-Zip: HALLANDALE, FL 33009

Title: D ( ) Delete
Name: BRYN, USHER
Address: 3491 N. 47TH AVENUE
City-St-Zip: HOLLYWOOD, FL 33021

Title: D ( ) Delete
Name: BRYN, BREBDA
Address: 3491 N. 47TH AVENUE
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: BRYN, BRENDA
Address: 3491 N. 47TH AVENUE
City-St-Zip: HOLLYWOOD, FL 33021

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: MOSHE KIEVMAN D 06/13/2007
Electronic Signature of Signing Officer or Director — Date