2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001084

FILED Feb 14, 2007 Secretary of State

Entity Name: CHABAD-LUBAVITCH RUSSIAN CENTER OF SOUTH FLORIDA, INC.

Current Principal Place of Business:				New Principal Place of Business:		
403 POINCIANA DRIVE SUNNY ISLES, FL 33160				17150 COLLINS AVE. #101-228 SUNNY ISLES BEACH, FL 33160		
Current Mailing Address:				New Mailing Address:		
1100 NE 163 ST # 401 MIAMI, FL 33162				17150 COLLINS AVE. #101-228 SUNNY ISLES BEACH, FL 33160		
FEI Number:	04-3758388	FEI Number Applied For ()	FEI Nun	nber Not Appli	icable () Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:		Name and	Address of New Registered Agent:	
1100 NE 1 SUITE 401 N.MIAMI B The above in the State	EACH, FL 331 named entity s e of Florida.	62 US	rpose o	f changing it	es registered office or registered agent, or both,	
SIGNATUF		ic Signature of Registered Agen	.+		Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
OFFICER	S AND DIREC	IURS:		ADDITION	S/CHANGES TO OFFICERS AND DIRECTOR:	
Title: Name: Address: City-St-Zip:	P () KALLER, ALEX 403 POINCIANA SUNNY ISLES,	DRIVE		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	V () KALLER, CHAN 403 POINCIANA SUNNY ISLES,	DRIVE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ST () ALTEIN, YAKOV 1378 UNION ST BROOKLYN, NY			Title: Name: Address: City-St-Zip:	()Change()Addition	
Title: Name: Address: City-St-Zip:	D () AISEMAN, DOL 503 12TH ST AF MIAMI BEACH,	PT 5		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () KEIFITZ, MIKHA 17500 N BAY R SUNNY ISLES E	D		Title: Name: Address: City-St-Zip:	D (X) Change () Addition KEIFITZ, MIKHAIL 17500 N BAY RD SUNNY ISLES BEACH, FL	

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: ALEXANDER KALLER MR 02/14/2007