2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001084

FILED Apr 02, 2008 Secretary of State

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

Current Principal Place of Business:				New Principal Place of Business:		
17150 COLLINS AVE. #101-228				403 POINCIANA DRIVE SUNNY ISLES BEACH, FL 33160		
SUMMY IS	LES BEACH, F	L 3316U				
Current Mailing Address:				New Mailing Address:		
17150 COLLINS AVE. #101-228 SUNNY ISLES BEACH, FL 33160				403 POINCIANA DRIVE SUNNY ISLES BEACH, FL 33160		
	: 04-3758388	FEI Number Applied For ()	FEI Nur	nber Not Applicable ()	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	EACH, FL 331	62 US	urnose o	ROTH, AVROHOM N 1110 NE 170TH STRI N.MIAMI BEACH, FL	EET	
	e of Florida.	abilitis tilis statement for the p	ui pose o	r changing its registere	a office of registered agent, or both,	
SIGNATURE: AVROHOM N. ROTH					04/02/2008	
	Electron	ic Signature of Registered Age	ent		Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
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:				Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	e: AISEMAN, DOLLY DR ess: 503 12TH ST APT 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:	() Change () Addition	

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: ALEXANDER KALLER P 04/02/2008