2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003416

Entity Name: MENORAH FOUNDATION, INC.

FILED Jan 29, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

% AIDA FURMANSKI 11010 NW 30TH ST COL 2014 STE 104 MIAMI, FL 33172

Current Mailing Address: New Mailing Address:

% AIDA FURMANSKI 11010 NW 30TH ST COL 2014 STE 104 MIAMI, FL 33172

FEI Number: 98-0396531 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CAHLIN, RICHARD A CPA 2525 PONCE DE LEON BLVD 5TH FL MIAMI, FL 33134 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: () Change () Addition

 Name:
 FURMANSKI, AIDA
 Name:

 Address:
 CPL 2014 11010 NW 30TH ST 104
 Address:

 Address:
 CPL 2014 11010 NW 30TH ST 104
 Address:

 City-St-Zip:
 MIAMI, FL 33172
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 CHIPRUT, EDMUNDO E
 Name:

 Address:
 COL 2014 11010 NW 30TH ST 104
 Address:

 City-St-Zip:
 MIAMI, FL 33172
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 BEDA, GLORIA
 Name:

 Address:
 COL 2014 11010 NW 30TH ST 104
 Address:

 Address:
 COL 2014 11010 NW 30TH ST 104
 Address:

 City-St-Zip:
 MIAMI, FL 33172
 City-St-Zip:

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: AIDA FURMANSKI D 01/29/2009