

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006171

FILED
Mar 26, 2009
Secretary of State

Entity Name: JEWISH EDUCATIONAL LEADERSHIP INSTITUTE, INC.

Current Principal Place of Business:

1015 W 46 STREET
MIAMI BEACH, FL 33140 US

New Principal Place of Business:

Current Mailing Address:

1015 W 46 STREET
MIAMI BEACH, FL 33140 US

New Mailing Address:

FEI Number: 20-1281655

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRANKFORTER, MARC
1015 W 46 STREET
MIAMI BEACH, FL 33140 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: P () Delete
Name: FRANKFORTER, MARC
Address: 1015 W 46 STREET
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: VP () Delete
Name: FRANKFORTER, LOUIZA
Address: 1015 W 46 STREET
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: T () Delete
Name: ROSSENWASSER, ROBERT
Address: 610 NE 168TH STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: AS () Delete
Name: AMAR, MARC
Address: 10155 COLLINS AVENUE
City-St-Zip: BAL HARBOR, FL 33154

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:

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: MARC FRANKFORTER

P

03/26/2009

Electronic Signature of Signing Officer or Director

_____ Date