## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000001576

Entity Name: CHABAD OF DOWNTOWN, INC.

FILED Jan 09, 2007 Secretary of State

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

333 N. NEW RIVER DR. E. 900 E. BROWARD BLVD.

FORT LAUDERDALE, FL 33301 US 4TH FLOOR

FORT LAUDERDALE, FL 33301 US

**New Mailing Address: Current Mailing Address:** 

713 SE 7TH ST

FORT LAUDERDALE, FL 33301 US

FEI Number: 20-2370518 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:

SHEIN, MICHAEL ESQ 700 SÉ THIRD AVENUE THIRD FLOOR FORT LAUDERDALE, FL 33301 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:

Name: Address:

City-St-Zip:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

## **OFFICERS AND DIRECTORS:**

(X) Change ( ) Addition () Delete KAPLAN,, SCHNEUR, Z RABBI KAPLAN, SCHNEUR, Z RABBI Name: 333 N. NEW RIVER DR. E. 4TH FLOOR Address: 1314 E LAS OLAS BLVD. SUITE 701 FORT LAUDERDALE, FL 33301 US City-St-Zip: FORT LAUDERDALE, FL 33301 US

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

Name: HECHT, NOSON Name: Address: 7019 FLEET ST. Address: FOREST HILLS, NY 11375 US City-St-Zip: City-St-Zip:

Title: VΡ () Delete Title: (X) Change ( ) Addition

ZARCHI, MEYER ZARCHI, MEYER Name: Name: Address: 266 47TH ST. Address: 266 47TH ST.

City-St-Zip: BROOKLYN, NY 11220 US City-St-Zip: BROOKLYN, NY 11220 US

Title: () Delete Title: ( ) Change (X) Addition Name: Name: KAPLAN, DEVORAH R MRS.

Address: Address: 713 SE 7TH STREET

City-St-Zip: City-St-Zip: FORT LAUDERDALE, FL 33301

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: RABBI SCHNEUR Z KAPLAN Ρ 01/09/2007