

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 04, 2009
Secretary of State**

DOCUMENT# N05000005330

Entity Name: CHABAD OF SOUTH BEACH, INC.

Current Principal Place of Business:

1035 WEST AVE
405
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

1035 WEST AVE
405
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 20-2928281 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MANN, SHRAGA
1035 WEST AVE
405
MIAMI BEACH, FL 33139 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: PD () Delete
Name: MANN, SHRAGA
Address: 1035 WEST AVE, APT. #405
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: LIPSKIER, ZEV
Address: 1035 WEST AVENUE #505
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: KLEINMAN, SHALOM
Address: 1100 WEST AVENUE #416
City-St-Zip: MIAMI BEACH, FL 33139

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:

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: SHRAGGA MANN

PD

05/04/2009

Electronic Signature of Signing Officer or Director

Date