

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2008 8:00 am
Secretary of State

04-30-2008 90196 019 ****70.00

DOCUMENT # N05000007241

1. Entity Name
B'NAI YISRAEL, INC.



Principal Place of Business
**6306 PEMBROKE ROAD, 2ND FLOOR WEST
MIRAMAR, FL 33023**

Mailing Address
**6597 RACQUET CLUB DR
LAUDERHILL, FL 33319**

60034058



04282008 Chg-NP CR2E037 (12/08)

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SPIEGEL & UTRERA, P.A.
1840 SOUTHWEST 22 STREET, 4TH FLOOR
MIAMI, FL 33145**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **DPT** ☐ Delete
NAME **BENOIT, HAROLD**
STREET ADDRESS **6306 PEMBROKE ROAD, 2ND FLOOR WEST**
CITY-ST-ZIP **MIRAMAR, FL 33023**

TITLE **AT** ☐ Delete
NAME **BULLOCK, AUDREY**
STREET ADDRESS **6306 PEMBROKE ROAD, 2ND FLOOR WEST**
CITY-ST-ZIP **MIRAMAR, FL 33023**

TITLE **SD** ☐ Delete
NAME **BULLOCK, AUDREY**
STREET ADDRESS **6306 PEMBROKE ROAD, 2ND FLOOR WEST**
CITY-ST-ZIP **MIRAMAR, FL 33023**

TITLE **AT** ☒ Delete
NAME **BABB-ALLEYNE, LOVERN**
STREET ADDRESS **2734 NW 80TH AVE**
CITY-ST-ZIP **SUNRISE, FL 33322**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VPD** ☐ Change ☒ Addition
NAME **Rickie Gibson**
STREET ADDRESS **6306 Pembroke Rd, 2ND FL West**
CITY-ST-ZIP **Miramar FL 33023**

TITLE **D** ☐ Change ☒ Addition
NAME **Wayne Davis**
STREET ADDRESS **6306 Pembroke Rd, 2ND FL West**
CITY-ST-ZIP **Miramar, FL 33023**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Harold Benoit HAROLD BENOIT**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/08 954-557-1821
Date Daytime Phone #