

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012645

Entity Name: ISRAELHELP.ORG, INC.

FILED  
Jan 22, 2007  
Secretary of State

## Current Principal Place of Business:

3040 MERLIN DRIVE NORTH  
JACKSONVILLE, FL 32257

## New Principal Place of Business:

7883 CHASE MEADOWS DR E  
JACKSONVILLE, FL 32256

## Current Mailing Address:

3040 MERLIN DRIVE NORTH  
JACKSONVILLE, FL 32257

## New Mailing Address:

7883 CHASE MEADOWS DR E  
JACKSONVILLE, FL 32256

FEI Number: 20-3973417

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

## Name and Address of New Registered Agent:

NOVACK, SHMUEL  
7883 CHASE MEADOWS DR E  
JACKSONVILLE, FL 32256 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: SHMUEL NOVACK

01/22/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: VP ( ) Delete  
Name: NOVACK, SHMUEL  
Address: 3040 MERLIN DRIVE NORTH  
City-St-Zip: JACKSONVILLE, FL 32257

Title: P ( ) Delete  
Name: LEVIN, YAKOV  
Address: 3040 MERLIN DRIVE NORTH  
City-St-Zip: JACKSONVILLE, FL 32257

Title: S ( ) Delete  
Name: NOVAK, CHANA  
Address: 3040 MERLIN DRIVE NORTH  
City-St-Zip: JACKSONVILLE, FL 32257

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition  
Name: NOVACK, SHMUEL  
Address: 7883 CHASE MEADOWS DR E  
City-St-Zip: JACKSONVILLE, FL 32256

Title: P (X) Change ( ) Addition  
Name: LEVIN, YAKOV  
Address: 7883 CHASE MEADOWS DR E  
City-St-Zip: JACKSONVILLE, FL 32256

Title: S (X) Change ( ) Addition  
Name: NOVACK, CHANA  
Address: 7883 CHASE MEADOWS DR E  
City-St-Zip: JACKSONVILLE, FL 32256

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: SHMUEL NOVACK

VP

01/22/2007

Electronic Signature of Signing Officer or Director

Date