

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001662

Entity Name: SHAAREI TESHUVA, INC.

FILED
Mar 20, 2008
Secretary of State

Current Principal Place of Business:

64 GREENS ROAD
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

64 GREENS ROAD
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GOLDSMITH, MICHAEL RABBI
64 GREENS ROAD
HOLLYWOOD, FL 33021 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: PTD () Delete
Name: GOLDSMITH, MICHAEL RABBI
Address: 64 GREENS ROAD
City-St-Zip: HOLLYWOOD, FL 33021

Title: VPD () Delete
Name: BECERRA, ESTEBAN
Address: 10625 HAMMOCKS BLVD. #622
City-St-Zip: MIAMI, FL 33196

Title: ST () Delete
Name: BENBENISHTI, NIETZAH
Address: 9431 E BAY HARBOUR DRIVE #2
City-St-Zip: BAY HARBOUR ISLANDS, 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:

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: ESTEBAN BECERRA

VPD

03/20/2008

Electronic Signature of Signing Officer or Director

Date