2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011226

City-St-Zip:

HOLLYWOOD, FL 33019 US

Entity Name: YESHIVA OR SHLOMO, INC.

FILED Apr 30, 2008 Secretary of State

| Current Principal Place of Business: | | | Now Principal Place | New Principal Place of Business: | |
|---|---|--------------------------------|---|--|--|
| 1121 NW 89TH WAY | | | New Fillicipal Flace | or Business. | |
| | ION, FL 33322 | | | | |
| Current Mailing Address: | | | New Mailing Addres | New Mailing Address: | |
| | 89TH WAY ION, FL 33322 | | | | |
| FEI Number: | | FEI Number Applied For (X) | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and | l Address of Cu | rrent Registered Agent: | Name and Address | of New Registered Agent: | |
| 1121 NW 8 | ARYEH L RABE 89TH WAY ION, FL FL | US | | | |
| | e named entity su e of Florida. | bmits this statement for the p | urpose of changing its registere | ed office or registered agent, or both, | |
| SIGNATUI | RE: | | | | |
| | Electronic | Signature of Registered Age | nt | Date | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANG | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | P () D MOSHEN, ARYEH 1121 NW 89TH W PLANTATION, FL | RABBI 'AY | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | VP () D LENNHOFF, TASH 102 NORTH 10TH HIGHLAND PARK | IA AVENUE | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | VP () D CARMEN, CRINC 2334 48TH AVE S SEATTLE, WA 98 | OLI W | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | VP () D MOSHEN, FAYE 962 EAST 32ND S BROOKLYN, NY | STREET | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: | VP () D TILLES, ELLEN 1300 HARRISON | | Title: Name: Address: | () Change () Addition | |

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.

City-St-Zip:

SIGNATURE: (RABBI) ARYEH MOSHEN P 04/30/2008