## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

# DOCUMENT# N07000011384

Entity Name: ETZ HACHAIM, INC.

FILED Mar 18, 2008 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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9745 BAY HARBOR TERRACE 64 GREENS RD

HOLLYWOOD, FL 33021

BAY HARBOR ISLANDS, FL 33154

Current Mailing Address: New Mailing Address:

9745 BAY HARBOR TERRACE BOX 546121

7 SURFSIDE, FL 33154 BAY HARBOR ISLANDS, FL 33154

FEI Number: 26-1553160 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

### Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BEBENISTI, AMRAM
9745 BAY HARBOR TERRACE
BEBENISTI, AMRAM
64 GREENS RD

HOLLYWOOD, FL 33021 US

BAY HARBOR ISLANDS, FL 33154 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: 03/18/2008

Electronic Signature of Registered Agent Date

#### **OFFICERS AND DIRECTORS:**

#### ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name:BENBENISTI, AMRAMName:BENBENISTI, AMRAMAddress:9745 BAY HARBOR TERRACE #7Address:64 GREENS RDCity-St-Zip:BAY HARBOR ISLANDS, FL 33154City-St-Zip:HOLLYWOOD, FL 33021

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BENBENISTI, NIETZAH S
 Name:

 Address:
 9745 BAY HARBOR TERRACE #7
 Address:

 City-St-Zip:
 BAY HARBOR ISLANDS, FL 33154
 City-St-Zip:

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BENBENISTI, CHAIMVITEL
 Name:

 Address:
 9745 BAY HARBOR TERRACE #7
 Address:

 City-St-Zip:
 BAY HARBOR ISLANDS, FL 33154
 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: AMRAM BENBENISTI MR 03/18/2008