

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002393

FILED  
Feb 17, 2011  
Secretary of State

Entity Name: YAD DOVID, INC.

**Current Principal Place of Business:**

19559 NE 10TH AVE  
NORTH MIAMI BEACH, FL 33179

**New Principal Place of Business:**

**Current Mailing Address:**

19559 NE 10TH AVE  
NORTH MIAMI BEACH, FL 33179

**New Mailing Address:**

FEI Number: 80-0162253

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LEVINE, JACK  
16855 NE 2ND AVE SUITE 303  
NORTH MIAMI BEACH, FL 33162 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: PD  
Name: JACOB, ALLAN I  
Address: 19559 NE 10TH AVE  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: STD  
Name: JACOB, SANDRA  
Address: 19559 NE 10TH AVE  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: D  
Name: BIBERFIELD, YECHIEL  
Address: 19559 NE 10TH AVE  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: D  
Name: JEGER, STEVEN  
Address: 19559 NE 10TH AVE  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: D  
Name: JACOB, DANNY  
Address: 19559 NE 10TH AVE  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

I hereby 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 all other like empowered.

SIGNATURE: ALLAN I JACOB

PD

02/17/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date