

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007620

FILED  
Feb 03, 2010  
Secretary of State

**Entity Name:** CHABAD OF GOLDEN BEACH SYNAGOGUE, INC.

**Current Principal Place of Business:**

19201 COLLINS AVE., UNIT C101,102 ,115  
SUNNY ISLES, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

19201 COLLINS AVE., UNIT C101,102 ,115  
SUNNY ISLES, FL 33160

**New Mailing Address:**

**FEI Number:** 27-1435852

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GRISALES-RACINI, OSCAL  
2999 NE 191ST ST.,CONCORD CENTRE II,PH-8  
AVENTURA, FL 33180 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:** AMAR, RABBI CHAY  
**Address:** 19201 COLLINS AVE., UNIT C101,102 ,115  
**City-St-Zip:** SUNNY ISLES, FL 33160

**Title:** V  
**Name:** GORIOVEZKY, HARRY  
**Address:** 19201 COLLINS AVE., UNIT C101,102 ,115  
**City-St-Zip:** SUNNY ISLES, FL 33160

**Title:** SD  
**Name:** AMAR, DINA  
**Address:** 19201 COLLINS AVE., UNIT C101,102 ,115  
**City-St-Zip:** SUNNY ISLES, FL 33160

**Title:** DT  
**Name:** NAKACHE, PIERRE  
**Address:** 19201 COLLINS AVE., UNIT C101,102 ,115  
**City-St-Zip:** SUNNY ISLES, FL 33160

**Title:** D  
**Name:** HANKIN, MOSHE  
**Address:** 19201 COLLINS AVE., UNIT C101,102 ,115  
**City-St-Zip:** SUNNY ISLES, FL 33160

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:** AMAR RABBI CHAY

PD

02/03/2010

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

\_\_\_\_\_  
Date