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Jan 21 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N09674 (5)

1. Corporation Name

MT. SINAI N.M.B. TEMPLE, INC.

Principal Place of Business

Mailing Address

C/O HERMAN LIPPERT
3030 MARCOS DR. T-611
N. MIAMI BEACH FL 33160C/O HERMAN LIPPERT
3030 MARCOS DR. T-611
N. MIAMI BEACH FL 33160-25843. Date Incorporated or Qualified
06/11/19853a. Date of Last Report
06/11/1996

2. Principal Place of Business

2a. Mailing Address

21 131 9th St

26 Herman Lippert

22 Suite, Apt. #, etc.
Building27 Suite, Apt. #, etc.
3030 Marcos Dr23 City & State
Miami FL28 City & State
Aventura FL24 Zip
3312729 Zip
3316025 Country
Dade30 Country
Dade

4. FEI Number

65-0041568

Applied For

Not Applicable

5. Certificate of Status Desired

8.75 Additional

Fee Required

6. Election Campaign Financing
Trust Fund Contribution5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032
Florida Statutes

Yes No

Non Profit

9. Name and Address of Current Registered Agent

LIPPERT, HYMAN
3030 MARCOS DR. T-611
NORTH MIAMI BEACH FL 33160

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VD
NAME MAY, RANDOLPH C
STREET ADDRESS 19840 NE MIAMI CT
CITY-ST-ZIP N.MIAMI BEACH FL

DELETE

TITLE D
NAME LIPPERT, HERMAN
STREET ADDRESS 3030 MARCOS DR. T-611
CITY-ST-ZIP N.MIAMI BEACH FL

DELETE

TITLE D
NAME LABOTT, HENRY
STREET ADDRESS 5306 N.W. 49 TERR.
CITY-ST-ZIP FT. LAUDERDALE, L.

DELETE

TITLE T
NAME KRUFMAN, ALEX
STREET ADDRESS 8100 S.W. 24TH ST.
CITY-ST-ZIP NORTH LAUDERDALE, FL

DELETE

TITLE T
NAME CIMENT, ROBERT
STREET ADDRESS 2910 POINTEAST DR.
CITY-ST-ZIP MIAMI, FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Herman Lippert
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/19/97

805-931-1336
Daytime Phone # 0031533

CR2E037 (9/96)