

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000008665

**FILED**  
**Mar 29, 2012**  
**Secretary of State**

**Entity Name:** THE BEHAL FEJER INSTITUTE, INC.

**Current Principal Place of Business:**

1000 LINCOLN ROAD STE 208  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

1000 LINCOLN ROAD STE 208  
MIAMI BEACH, FL 33139

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

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

WISS, ILONA-ANNE  
1000 LINCOLN ROAD STE 208  
MIAMI BEACH, FL 33139 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: WISS, ILONA-ANNE  
Address: 1000 LINCOLN ROAD STE 208  
City-St-Zip: MIAMI BEACH, FL 33139

Title: D  
Name: KNAPP, DINA  
Address: 3457 SHERIDAN AVE  
City-St-Zip: MIAMI BEACH, FL 33140

Title: D  
Name: MELAMID, MONICA  
Address: 3758 PRAIRIE AVE  
City-St-Zip: MIAMI BEACH, FL 33140

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:** ILONA-ANNE WISS

**PRES**

**03/29/2012**

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

\_\_\_\_\_  
Date