

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 29, 2002 8:00 am
Secretary of State

05-29-2002 90731 034 ****61.25

DOCUMENT # N12756

1. Entity Name

UNITED ISRAEL CHARITIES, INC.

Principal Place of Business

Mailing Address

21906 LAKE FOREST CIRCLE
 201
 BOCA RATON FL 33433-3363
 US

21906 LAKE FOREST CIRCLE
 201
 BOCA RATON FL 33433-3363
 US

2. Principal Place of Business

3. Mailing Address

7186 SAN SALVADOR DR P.O. Box 880085

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
 BOCA RATON FL

City & State
 BOCA RATON FL

4. FEI Number
 59-2659890

Applied For
 Not Applicable

Zip
 33433-1011

Country
 Palm Beach

Zip
 33488-0085

Country
 Palm Beach

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GOLDSTEIN, GERALD RABBI
 7627 SIERRA DR W
 BOCA RATON FL 33433

Name

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

7186 SAN SALVADOR DR
 BOCA RATON

City

FL

Zip Code

33433-1011

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

21 MAY 2002

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
 Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 PD
 GOLDSTEIN, GERALD RABBI
 7627 SIERRA DR W
 BOCA RATON FL 33433 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 RABBI
 Mr. Gerald K. Goldstein
 7186 San Salvador Dr.
 Boca Raton, FL 33433 ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 VPD
 GOLDSTEIN, DAVID ESQ.
 8930 SLEEPING BEAR RD.
 SKOKIE IL 60076 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 TD
 SINGER, DANIEL RABBI
 662 LEFFERTS AVE.
 BROOKLYN NY 11203 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 SD
 SHUCHAT, RACHEL
 447 TROY AVE.
 BROOKLYN NY 11203 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

21 MAY 2002 561.213.2364

Date

Daytime Phone #

CR2E037 (9/01)