

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N12788

FILED
Oct 20, 2004
Secretary of State**Entity Name:** BETH TORAH ADATH YESHURUN, INC.**Current Principal Place of Business:**20350 NE 26TH AVE
NORTH MIAMI BEACH, FL 33180 US**New Principal Place of Business:****Current Mailing Address:**20350 NE 26TH AVE
NORTH MIAMI BEACH, FL 33180 US**New Mailing Address:****FEI Number:** 59-2750308 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**Name and Address of Current Registered Agent:**BERGOR, JOEL
20350 NE 26 AVE
NORTH MIAMI BEACH, FL 33180 US**Name and Address of New Registered Agent:**BERGER, JOEL
20350 NE 26 AVE
NORTH MIAMI BEACH, FL 33180 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: JOEL BERGER

10/20/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** VP () Delete
Name: KOCH, CHARLES
Address: 20350 NE 26TH AVE
City-St-Zip: NORTH MIAMI BCH., FL**Title:** TD () Delete
Name: SID, KOSIOVSKY
Address: 19923 NE 19 PLACE
City-St-Zip: MIAMI, FL 33179**Title:** PD () Delete
Name: SCHECK, RAQUEL
Address: 2120 NE 190 TERR
City-St-Zip: MIAMI, FL 33179**Title:** V () Delete
Name: WOLFSON, ALAN
Address: 368 GOLDEN BEACH DR
City-St-Zip: GOLDEN BEACH, FL 33160**Title:** VED () Delete
Name: DA RICK, MARS
Address: 2111 NE 211 TERRACE
City-St-Zip: MIAMI, FL 33179**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** V (X) Change () Addition
Name: MASIA, BRUCE
Address: 368 GOLDEN BEACH DR
City-St-Zip: GOLDEN BEACH, FL 33160**Title:** VED (X) Change () Addition
Name: DR RICK, MARS
Address: 2111 NE 211 TERRACE
City-St-Zip: MIAMI, FL 33179

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: DR RICK MARS

VED

10/20/2004

Electronic Signature of Signing Officer or Director

Date