## 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N12788

FILED Oct 05, 2006 Secretary of State

Entity Name: BETH TORAH ADATH YESHURUN, INC.

Current Principal Place of Business:			New Principal Place of Business:	
	26TH AVE IAMI BEACH, FL 33180	US		
Current Mailing Address:			New Mailing Address:	
20350 NE : NORTH M	26TH AVE IAMI BEACH, FL 33180	US		
In accordan	: 59-2750308 FEI Numbe ce with s. 607.193(2)(b), F.S., t I Address of Current Reg	he corporation did not receive	•	Certificate of Status Desired ( ) s of New Registered Agent:
BERGER, JOEL 20350 NE 26 AVE NORTH MIAMI BEACH, FL 33180 US			GOLDMAN, JOEL 20350 NE 26 AVE NORTH MIAMI BEACH, FL 33180 US	
The above in the State	named entity submits this e of Florida.	statement for the purpose	of changing its registe	red office or registered agent, or both,
SIGNATURE: JOEL GOLDMAN				10/05/2006
	Electronic Signature	e of Registered Agent		Date
OFFICERS	S AND DIRECTORS:		ADDITIONS/CHAN	GES TO OFFICERS AND DIRECTOR
Title: Name: Address: City-St-Zip:	VD () Delete KETTLER, BRIAN 19480 39 CT GOLDEN BEACH, FL 33160		Title: Name: Address: City-St-Zip:	( ) Change( ) Addition
Title: Name: Address: City-St-Zip:	TD () Delete LINKEWER, JORGE 2220 NE 211 ST MIAMI, FL 33180		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	EVPD () Delete ORVIETO, MARCIA 1990 NE 197 ST MIAMI, FL 33179		Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	PD () Delete MASIA, BRUCE 368 GOLDEN BEACH DR GOLDEN BEACH, FL 33160		Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	PPDD ( ) Delete DR RICK, MARS 2111 NE 211 TERRACE MIAMI, FL 33179		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	VD () Delete TAMIR, DENISE 2241 NE 197 ST N MIAMI BEACH, FL 33180		Title: Name: Address: City-St-Zip:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: BRUCE MASIA PRES 10/05/2006