2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2004
Secretary of State

DOCUMENT# N13360

Entity Name: CHABAD OF SOUTH BROWARD, INC.

Current Principal Place of Business:

1295 E. HALLANDALE BLVD.
HALLANDALE, FL 33009

New Principal Place of Business:

Current Mailing Address:

1295 E. HALLANDALE BLVD.
HALLANDALE, FL 33009

New Mailing Address:

FEI Number: 59-2496454 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TENNENHAUS, RAPHAEL
1295 E. HALLANDALE BEACH BLVD.
HALLANDALE, FL 33009

Name and Address of New Registered Agent:

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: P ( ) Delete
Name: TENNENHAUS, RAPHAEL,
Address: 1295 E HALLANDALE BCH
City-St-Zip: HALLANDALE, FL

Title: S ( ) Delete
Name: SCHWARTZ, MOSHE,
Address: 1108 NE 5TH ST.
City-St-Zip: HALLANDALE, FL

Title: TD ( ) Delete
Name: BISTON, JOSEPH,
Address: 1500 STATE ROAD 7
City-St-Zip: MARGATE, FL 33063

Title: D ( ) Delete
Name: KUDAN, DAVID
Address: 1245 RODMAN ST
City-St-Zip: HOLLYWOOD, FL 33020

Title: D (X) Delete
Name: KUDAN, DOVID,
Address: 1001 3 ISLAND BLVD
City-St-Zip: HALLANDALE, FL

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: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: RABBI MOSHE SCHWARTZ S 01/19/2004

Electronic Signature of Signing Officer or Director Date