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FILED

May 30 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N13860 (4)

1. Corporation Name

CONGREGATION AGUDATH ACHIM FOUNDATION, INC.

Principal Place of Business

Mailing Address

19255 NE 3RD AVE
NORTH MIAMI FL 3317919255 NE 3RD AVE
NORTH MIAMI FL 33179-38253. Date Incorporated or Qualified
03/17/19863a. Date of Last Report
05/21/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

25 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

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4. FEI Number

59-2702759

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes ☐ No

9. Name and Address of Current Registered Agent

SOBEL, PHILIP
20120 NE 2ND AVE.
N MIAMI FL 33179

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE SOBEL PHILIP PRESIDENT

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

(NOTE: Registered Agent signature required when reinstating)

5/1/97

12. OFFICERS AND DIRECTORS

TITLE T DELETE

NAME MALER, JOSZEF
STREET ADDRESS 125 NW 197TH ST.
CITY - ST - ZIP MIAMI FL 33169

TITLE P DELETE

NAME SOBEL, PHILIP
STREET ADDRESS 20120 NE 2ND AVENUE
CITY - ST - ZIP NORTH MIAMI FL 33179

TITLE T DELETE

NAME ZELLNER, RUTH
STREET ADDRESS 245 NE 191 ST.
CITY - ST - ZIP N. MIAMI FL 33179

TITLE T DELETE

NAME MALER, ELAINE
STREET ADDRESS 125 NW 197TH ST.
CITY - ST - ZIP MIAMI FL 33169

TITLE D DELETE

NAME POUPKO, JAY
STREET ADDRESS 831 NE 206 ST
CITY - ST - ZIP MIAMI FL

TITLE DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE T Change Addition

1.2 NAME HELLEN KOLMAN
1.3 STREET ADDRESS 19051 N.E. 2nd Ave.
1.4 CITY - ST - ZIP MIAMI, FL. 33179

2.1 TITLE Change Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE Change Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE Change Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE Change Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE Change Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE REQUIRED SOBEL PHILIP PRESIDENT

Date

Daytime Phone # 0033230

CR2E037 (9/96)