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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # N14347

1. Corporation Name
 HOLOCAUST MEMORIAL COMMITTEE, INC.

333934 - 90002 - 18



Principal Place of Business: 1933 MERIDIAN AVE, MIAMI BCH, FL 33139, US
 Mailing Address: 1933-1945 MERIDIAN AVE, STE 2130, MIAMI FL 33139, US

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21 1933 MERIDIAN AVE, MIAMI BCH, FL 33139, US	26 1933-1945 MERIDIAN AVE, STE 2130, MIAMI FL 33139, US	04/11/1986
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	4. FEI Number
		59-2659641
23 City & State	28 City & State	5. Certificate of Status Desired
	MIAMI BCH., FL	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required
24 Zip	29 Zip	6. Election Campaign Financing
	33139	<input type="checkbox"/> \$5.00 May Be Added to Fees
	30 DSAT	

9. Name and Address of Current Registered Agent
 SMITH, HARRY B
 RUDEN BARNETT
 701 BRICKELL AVE #1900
 MIAMI FL 33131

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City
 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 _____ (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE	PT <input type="checkbox"/> DELETE
NAME	BRAMAN, NORMAN
STREET ADDRESS	ONE SE 3RD AVE., SUITE 2130
CITY-ST-ZIP	MIAMI BCH FL
TITLE	VP <input type="checkbox"/> DELETE
NAME	KATZ, EZRA
STREET ADDRESS	2665 SO BAYSHORE DR
CITY-ST-ZIP	COCONUT GROVE FL
TITLE	VP <input type="checkbox"/> DELETE
NAME	TREISTER, KENNETH
STREET ADDRESS	3660 BATTERSEA RD
CITY-ST-ZIP	COCONUT GROVE FL
TITLE	VP <input type="checkbox"/> DELETE
NAME	SCHAECTER, DAVID
STREET ADDRESS	DNS 3000 NW 125 ST
CITY-ST-ZIP	MIAMI FL
TITLE	VTD <input type="checkbox"/> DELETE
NAME	ROTHFIELD, WENDY
STREET ADDRESS	21075 NE 25TH ST.
CITY-ST-ZIP	N. MIAMIA BEACH FL
TITLE	VD <input type="checkbox"/> DELETE
NAME	GOLDBLOOM, GEORGE
STREET ADDRESS	201 ALHAMBRA CIRCLE
CITY-ST-ZIP	CORAL GABLES FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	"T" <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	JAMES RESNICK
1.3 STREET ADDRESS	1228 ALTON RD.
1.4 CITY-ST-ZIP	MIAMI BEACH, FL 33139
2.1 TITLE	"T" <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	JACK CHESTER
2.3 STREET ADDRESS	1865 BRICKELL AVE. #1109 BLDG. A
2.4 CITY-ST-ZIP	MIAMI, FL 33129
3.1 TITLE	"T" <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	RABBI SOLOMON SCHIFF
3.3 STREET ADDRESS	GMJF 4200 BISCAYNE BLVD.
3.4 CITY-ST-ZIP	MIAMI, FL 33137
4.1 TITLE	"T" <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	HARRY SMITH
4.3 STREET ADDRESS	RUDEN BARNETT 701 BRICKELL AVE.
4.4 CITY-ST-ZIP	MIAMI, FL 33131
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). If indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the effect of an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Section 119.07(3)(i), Block 12 or Block 13 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

CR2E037 (11/98)