

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18675

FILED  
Mar 17, 2009  
Secretary of State

Entity Name: AMERICAN EUROPEAN CONGREGATION, INC.

**Current Principal Place of Business:**

315 MADISON ST  
HOLLYWOOD, FL 33019 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 220918  
HOLLYWOOD, FL 330220918 US

**New Mailing Address:**

FEI Number: 59-2828625      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HALPERN, ARON  
1932 HOLLYWOOD BLVD  
HOLLYWOOD, FL 33020 US

**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: D ( ) Delete  
Name: GOLDSTEIN, GEORGE  
Address: 1201 S OCEAN DR  
City-St-Zip: HOLLYWOOD, FL 33019

Title: SD ( ) Delete  
Name: WASSERSTROM, BARRY  
Address: 1571 SEAGRAPE WAY  
City-St-Zip: HOLLYWOOD, FL 33019

Title: TD ( ) Delete  
Name: HALPERN, ARON  
Address: 1932 HOLLYWOOD BLVD  
City-St-Zip: HOLLYWOOD, FL 33020

Title: D ( ) Delete  
Name: ZUCKERMAN, SOL  
Address: 1850 S OCEAN DR  
City-St-Zip: HALLANDALE, FL 33009

Title: VD ( ) Delete  
Name: KAHN, REUBEN  
Address: 1500 S OCEAN DR  
City-St-Zip: HOLLYWOOD, FL 33019

Title: PD (X) Delete  
Name: COE, RICHARD  
Address: 329 MADISON ST  
City-St-Zip: HOLLYWOOD, FL 33019

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: GOLDSTEIN, GEORGE  
Address: 1201 S OCEAN DR  
City-St-Zip: HOLLYWOOD, FL 33019

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

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

Title: D (X) Change ( ) Addition  
Name: KUSHNIR, ISRAEL  
Address: 335 MONROE ST  
City-St-Zip: HOLLYWOOD, FL 33019

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 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: ARON HALPERN

TD

03/17/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date