2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Apr 17, 2006 8:00 am Secretary of State

1. Entity Nar			04	4-17-2006 90	338 043 1	****61.25				
%IRVING Y	CE OF Business YOUNG, DIRECTOR HWEST 10TH PLACE PL 55063 N W 8544 AW	Mailing Address C/O MORRIS FEDERMA 14088 CAMPANELI DELRAY SEACH FL 33	<u>1</u> 84	3 2-/						
2. Principal		we		afa 1111 a 11 a 1a 11 a 1£ 67 11	: 4181 BUBIH BHALI I	THUS REATH BINTS OFF	BAJOR BY 1888			
Suite, Apt	#, etc.	Suite, Apt. #, etc.	Suite Apt. #, etc.			1st MOORE CR2E037 (10/05)				
City & Sta	te	City & State			4. FEI Number	65-008801	4		oplied For of Applicable	
Zip	Country	333Q1	SPOWE	(S)	5. Certificate of	·		\$8.75 Add	ditional	
	6. Name and Address of Current F		13.0007	10.	7. Name and A	ddress of New I	Registered			
Name										
								 ;····		
14088-0ANDELLI- 7905 ON W 854h A greet Address (P.O. B)x Number is Not Accordable) Avenue										
	T,	DAMPIC AL			_					
		- 33341	City	m	Aen(FL	Zip.Cod	222/	
8. The above named entity stibmits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.										
SIGNATURE Signature: typed or printed rupe of registered agent and title if expeciable (NOTE: Registered Agent signature required when reinstating) DATE										
The contract of the contract o										
FILE NOW: FEE 1336725 9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees Florida: Department: of State										
10.	OFFICERS AND DIRE	ECTORS	11,	Α	ODITIONS/CHAN	IGES TO OFFICE	RS AND DI	RECTORS IN	10	
TITLE	SD BUBLINGON BOCE	☐ Delete	TITLE					☐ Change	🔲 ဦဴddition	
NAME STREET ADDRESS	BURLINSON, ROSE C/O IRVING YOUNG 6950 IVORYH	III 10TLI DI	NAME	1					-	
CITY-ST-ZIP	MARGATE FL 33063	ice (Offite	STREET ADDRESS CITY-ST-ZIP							
TITLE	1VP	☐ Delete	TITLE			<u> </u>		Change	☐ Addition	
NAME	MARTINO, SHELLY		NAME							
STREET ADDRESS CITY-ST-ZIP	7739 SOUTH HAMPTON TERR TAMARAC FL 33321		STREET ADDRESS CITY-ST-ZIP			-		,	~	
ΠΠΕ	1VP	∠ Delete	TITLE					☐ Change	☐ Addition	
NAME	MENAGED, ROSE		NAME						☐ Modition	
STREET ADDRESS CITY-ST-ZIP	2130 NW 33RD TERRACE		STREET ADDRESS							
TITLE	COCONUT GROVE FL 33066	<u> </u>	CITY-ST-ZIP							
NAME	PEUERMAN, MORRIS J	Delete	TITLE Name	171	an you	129 7	^	Change	☐ Addition	
STREET ADDRESS	4988 CARRPANELLI DR		STREET ADDRESS	790	40.00	824W	THE	سسطلار		
CITY-ST-ZIP	DELRAY BEACH FL 33484		CITY-ST-ZIP	-	Amara	r Au	3 3	10 Change 146-		
name	D SHALOM, LOUISE	Delete	TITLE					☐ Change	☐ Addition	
STREET ADDRESS	4332 NW 54TH ST		NAME STREET ARRIBECC		•				1	
CITY-ST-ZIP	COCONUT CREEK FL 33066		STREET ADORESS City-St-Zip						ļ	
TITLE		☐ Delete	TITLE					☐ Change	Addition	
NAME	N		NAME						Addition	
STREET ADDRESS CITY-ST-ZIP	\;		STREET ADDRESS							
UII 1 - 31 - ZD*	\		~CITY-ST-ZIP						ľ	

12. I hereby certify that the information supplied with this filing does not addity for the exemptions contained in Section 119. Florida Statutes. I further certify that the information indicated on this report or supplemental 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 of trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.