FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 29 AM 7:30

DOCUMENT # N35993 (7)

1. Corporation Name
FRIENDS OF LABOR ISRAEL, INC.

Principal Place of Business	Mailing Address
8640 S.W. 94TH STREET MIAMI FL 33156	8640 S.W. 94TH STREET MIAMI FL 33156

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/02/1990
3a. Date of Last Report: 12/12/1994
4. FEI Number: 65-0197640 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21 666 Fifth Avenue	26 666 Fifth Avenue
Suite, Apt. #, etc. 22 21st Floor	Suite, Apt. #, etc. 27 21st Floor
City & State 23 New York, NY	City & State 28 New York, NY
Zip / Country 24 10103 / 25 USA	Zip / Country 29 10103 / 30 USA

9. Name and Address of Current Registered Agent

CANTOR, HOWARD
8640 S.W. 94TH STREET
MIAMI FL 33156

10. Name and Address of New Registered Agent

81 Name: The Prentice-Hall Corporation System, Inc.
82 Street Address (P.O. Box Number is Not Acceptable): 1201 Hays Street
83: Suite 105
84 City: Tallahassee FL 85 Zip Code: 32301

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: By: Maria M. Nancy, Asst. Secy. (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE: 3-6-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	D ☒ Change ☐ Addition
NAME	TABACHNIKOFF, BARRY	12 NAME	Menachem Rosensaft
STREET ADDRESS	9400 SW 87TH AVENUE	13 STREET ADDRESS	350 Fifth Avenue
CITY-ST-ZIP	MIAMI FL	14 CITY-ST-ZIP	New York, NY 10118-0075
TITLE	D	21 TITLE	D ☒ Change ☐ Addition
NAME	ROSEN, PAUL	22 NAME	Seth Siegel
STREET ADDRESS	35 S.HIBISCUS DR,HIB.ISL	23 STREET ADDRESS	101 East 52nd Street, 33rd Floor
CITY-ST-ZIP	MIAMI BEACH FL	24 CITY-ST-ZIP	New York, NY 10022
TITLE	D	31 TITLE	D ☒ Change ☐ Addition
NAME	CANTOR, HOWARD	32 NAME	Harriet Mouchly-Weiss
STREET ADDRESS	8640 SW 94TH STREET	33 STREET ADDRESS	515 Madison Avenue, 34th Floor
CITY-ST-ZIP	MIAMI FL	34 CITY-ST-ZIP	New York, NY 10022
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 above, or on an attachment with an address.

SIGNATURE: Harriet Mouchly-Weiss 3/16/95 212-935-0210
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #