FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 **DOCUMENT** #

(2)

B'NAI B'RITH APARTMENTS OF DEERFIELD BEACH, II, INC.

FILED Mar 19 1998 8:00am Secretary of State



| Principal Place of I | Business | Mailing Address | | | T TOOLUSE ON THE BURN HOUR THAT ALL STORY OF THE STATE | | | |
|---|---|---|---|--|--|---|--|--|
| 55 S.W. 3RD AVE EERFIELD BCH. FL 33441 | | 255 S.W. 3RD AVE DEERFIELD BCH. FL 33441 | | | 3. Date incorporated or Qualified 01/16/1990 | | | |
| | | | | | 4. FEI Number | Applied For | | |
| | | | | | NOT APPLICABLE | Not Applicable | | |
| Principal Place | of Business | 28. Mailing Address | 988 | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, | etc. | | Election Campaign Financing Trust Fund Contribution | · · · · · · · · · · · · · · · · · · · | | |
| City & State | | City & State | | | 7. Is this nonprofit corporation a homeowners association? Yes No | | | |
| Zip | Country 25 | Zip 29 | Zip Country | | 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No. | | | |
| Name and Address of Current Registered Agent | | | | | 10. Name and Address of New Registered Agent | | | |
| | CH, DONALD E. OAKLAND PARK BOULEVA | IRD | | | ne et Address (P.O. Box Number is Not Acceptable) | | | |
| SUITE 470 FT. LAUDERDALE FL 33351-6746 | | | | 83 | | | | |
| | | | | 84 City | FL 85 Zip Code | | | |
| Pursuant to the office or regist agent. I am la | e provisions of Sections 617.05 lered agent, or both, in the Stat miliar with, and accept the obli- | i02 and 617.1508, Florid te of Florida. Such chan gations of, Section 617.0 | la Statutes, the a ge was authorize 0503, Florida Sta | bove-named cond by the corporal tutes. | rporation submits this statement for the purpose of ation's board of directors. I hereby accept the appo | changing its registered intrnent as registered | | |
| SIGNATURE | | | ~~~ | | | | | |

| agom. re | in termie with and docopt the obligations of bection t | 111.0000,11010 | a Statutes. | | | |
|----------------|--|----------------|--------------------|----------------------------|----------|------------|
| SIGNATURE | Signature, typed or printed name of registered agent and title if applicable | NATE D | | required when reinstating) | DATE | |
| 12. | OFFICERS AND DIRECTORS | H:31OH) | 13. | ADDITIONS/CHANGES TO OFFIC | | IS IN 12 |
| TITLE | | DELETE | 1.1 TITLE | | ☐ Change | Addition |
| NAME | HAMAMOVITCH, DONALD E. | | 1.2 NAME | | _ • | _ |
| STREET ADDRESS | 7770 W OAKLAND PK BLVD. | | 1.3 STREET ADDRESS | ` | | |
| CITY-ST-ZIP | FT. LAUDERDALE FL | | 1.4 CiTY-ST-ZIP | | | |
| TITLE | | DELETE | 2.1 TITLE | | ☐ Change | ☐ Addition |
| NAME | SCHWEBEL, ARTHUR | | 2.2 NAME | | | |
| STREET ADDRESS | 5231 S.W. 18TH ST. | | 2.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | PLANTATION FL | | 2. 4 CITY-ST-ZIP | | | |
| TITLE | PD L | DELETE | 3.1 TITLE | | ☐ Change | Addition |
| NAME | KONIGSBERG, LEONARD | | 3.2 NAME | | | |
| STREET ADDRESS | 1000 S. FEDERAL HWY 200 | 1 | 3.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | DEERFIELD BCH. FL | | 3.4. CITY-ST-ZIP | | • | |
| TITLE | 10 | DELETE | 4.1 TITLE | | ☐ Change | Addition |
| HAME | FENTIN, ARTHUR | | 4. 2 NAME | | | |
| STREET ADDRESS | 9831 HARBOR LAKES CIRCLE | | 4.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | BOYNTON BEACH FL 33437 | | 4.4 CITY-ST-ZIP | | | |
| TITLE | [VP □ | DELETE | 5.1 TITLE | | Change | ☐ Addition |
| NAME | LITTMAN, PAUL | | 5.2 NAME | | | |
| STREET ADDRESS | LYNHURST J-3039 | | 5.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | DEERFIELD BCH. FL 33442 | | 5.4 CITY-ST-ZIP | | | |
| TITLE | | DELETE | 6.1 TITLE | | ☐ Change | ☐ Addition |
| NAME | COFFINO, MORRIS | | 6.2 NAME | | | |
| STREET ADDRESS | 3003 PORTOFINO ISLE M-3 | | 6.3 STREET ADDRESS | | | |
| | OCCOMUT ORPEW PLANASA | | | | | |

14. I 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 material 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 or changed, or on an attachment with an address.

(964) 431-5590 3/2/9/