

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999

DOCUMENT # N43250

INTER-FAITH COUNCIL OF GREATER HOLLYWOOD, INC.

Principal Place of Business 1544 NORTH 42 AVENUE APT. 4 HOLLYWOOD FL 33020

Mailing Address

P.O. BOX 7133 HOLLYWOOD FL 33081 FILED Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90134 032 ****61.25



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2. Principal 21 Suite, Apr	Place of Business	2a. Mailing Address 26			3. Date Incorporated or Qualifed 05/06/1991				
22	i. #, eic.	Suite, Apt. #, etc.				4. FEI Number 59-2232406		A	pplied For
City & Sta	ate	City & State				39-2232400		_ N	lot Applicable
Zip	Country	28 Zip			· • • • • • • • • • • • • • • • • • • •	5. Certifcate of Status Desired			Additional Required
24	25		Count	try		6. Election Campaign Financing		\$5.00	May Be
1	9. Name and Address of Current		0}			Trust Fund Contribution		Added	to Fees
		Trogistores Agent	8	11 i	Name	10. Name and Address of New F	Registered	Agent	
SCHWARTZ, ELAINE J									
4601 SH	IERIDAN #208		8	2	Street Addres	ss (P.O. Box Number is Not Accepta	ble)		
	/OOD FL 33021		8	3					
			8	4 (City			85 Zip	Code
11. Pursuant	to the provisions of Sections 617.0502 registered agent, or both, in the State of	and 617.1508. Florida Statutes	the abo	VO 0	amed comes		<u> </u>	. :	ļ
office or a	registered agent, or both, in the State of am familiar with, and accept the obligation	Florida. Such change was auth	orized b	y the	arried corporation?	s board of directors. I hereby accep	purpose of a	changing its atment as re	registered
SIGNATURE		ons or, Section 617.0503, Florida	a Statute	8.		,			giotorou
	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: Re	oistered An	ent sin	gnature required wi	Data entretation)			
12.	OFFICERS AND		13.		jiradia radanaa wi	ADDITIONS/CHANGES TO OFF	DATE ICERS AND	O DIDECTO	NDC 111 42
TITLE	P	☐ DELETE	1.1 TITLE				ICERS AN	Change	
NAME	Frazin, rabbi robert		1.2 NAME		1			□ cuange	☐ Addition
STREET ADDRESS	5100 SHERIDAN STREET		1.3 STREE	FT ADY	ORESS				
CITY-ST-ZIP	HOLLYWOOD FL 33021		1.4 CITY-5		li i				
TITLE	VPD	☐ DELETE	2.1 TITLE	OI-ZI				Change	- A 1 200
NAME	PITTELL, ELAINE		2.2 NAME					☐ Criange	☐ Addition
STREET ADDRESS	4920 PIERCE STREET		2.3 STREE		DECC	,			ŀ
C/TY-ST-ZIP	HOLLYWOOD FL 33021		2.4 CITY-				,		1
TITLE	TD	☐ DELETE	3.1 TITLE	31-ZH	4 71	2.54			
NAME	KENT, MARY		3.2 NAME					Change	☐ Addition
STREET ADDRESS	3840 NORTH 45TH AVE.		3.3 STREE	TARA	IBESS	•			
CITY-ST-ZIP	HOLLYWOOD FL 33021		3.4. CITY- S		1				
TITLE	SD	☐ DELETE	4.1 TITLE	J. <u>L</u> .	- -			Change	A delici
NAME	SCOTT, NOSRAT		4. 2 NAME					□ Change	Addition
STREET ADDRESS	10461 N.W. 20TH STREET		4.3 STREET	TADD	RESS				
CITY-ST-ZIP	PEMBROKE PINES FL 33026		4.4 CITY-S	-					·
TITLE		☐ DELETE	5.1 TITLE					☐ Change	
NAME			5.2 NAME						☐ Addition
STREET ADDRESS		ĺ	5.3 STREE?	ADDF	RESS				1
CITY-ST-ZIP		ł	5.4 CITY-S1	T-ZIP					1
TITLE	·	☐ DELETE	6.1 TITLE			v	·-	Change	, Addition
NAME		i	6.2 NAME				ı	∩ renige	Addition
STREET ADDRESS			6.3 STREET	ADDR	₹ESS				
ZITY-ST-ZIP			6.4 City-St						, ,

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 Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROLSEN PATIRE AND TYPED OF PRINTED NAME & SIGNING OFFICER OF DIRECTOR PRAZIN 2/4/99 954-969-0205

CR2E037 (11/98)