

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43428

FILED  
May 01, 2007  
Secretary of State

Entity Name: AYTS CHAYIM MESSIANIC SYNAGOGUE, INC.

**Current Principal Place of Business:**

22095 ATAMAN ST  
BOCA RATON, FL 33428 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 811323  
BOCA RATON, FL 33481

**New Mailing Address:**

FEI Number: 65-0261270      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

BRAWER, IRA ETHAN  
22095 ATAMAN ST  
BOCA RATON, FL 33428 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: PD ( ) Delete  
Name: BRAWER, IRA E.,  
Address: 22095 ATAMAN ST  
City-St-Zip: BOCA RATON, FL 33428

Title: VSD ( ) Delete  
Name: BRAWER, GLORIA J.,  
Address: 22095 ATAMAN ST  
City-St-Zip: BOCA RATON, FL 33428

Title: TD ( ) Delete  
Name: JACOBS, R  
Address: 3259 CORAL RIDGE DR  
City-St-Zip: CORAL SPRINGS, FL 33085

Title: SD ( ) Delete  
Name: CIPORKIN, LORRY  
Address: 804 CYPRESS GROVE LANE #503  
City-St-Zip: POMPANO BEACH, FL 33069

Title: D ( ) Delete  
Name: CIPORKIN, PETER  
Address: 804 CYPRESS GROVE LANE #503  
City-St-Zip: POMPANO BEACH, FL 33069

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

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

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

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

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: IRA BRAWER

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

05/01/2007

\_\_\_\_\_  
Date