2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43428

FILED Apr 24, 2008 Secretary of State

Entity Name: AYTS CHAYIM MESSIANIC SYNAGOGUE, INC.

Current Principal Place of Business: New Principal Place of Business: 22095 ATAMAN ST BOCA RATON, FL 33428 US **Current Mailing Address: New Mailing Address:** P O BOX 811323 BOCA RATON, FL 33481 FEI Number: 65-0261270 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BRAWER, IRA ETHAN 22095 ATÁMAN ST BOCA RATON, FL 33428 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BRAWER, IRA E., Name: Name: 22095 ATAMAN ST Address: Address: City-St-Zip: BOCA RATON, FL 33428 City-St-Zip: Title: VSD () Delete Title: VD (X) Change () Addition BRAWER, GLORIA J., Name: CIPORKIN, PETER Name: Address: 22095 ATAMAN ST Address: 804 CYPRESS GROVE LANE #503 City-St-Zip: BOCA RATON, FL 33428 City-St-Zip: POMPANO BEACH, FL 33069 Title: TD () Delete Title: (X) Change () Addition JACOBS, R HUTCHER, JESSE Name: Name: 3259 CORAL RIDGE DR 11186 LADINO STREET Address: Address: City-St-Zip: CORAL SPRINGS, FL 33085 City-St-Zip: BOCA RATON, FL 33428 Title: SD (X) Delete Title: () Change () Addition Name: CIPORKIN, LORRY Name: 804 CYPRESS GROVE LANE #503 Address: Address: City-St-Zip: POMPANO BEACH, FL 33069 City-St-Zip: Title: (X) Delete Title: () Change () Addition CIPORKIN, PETER Name: Name: 804 CYPRESS GROVE LANE #503 Address: Address: City-St-Zip: POMPANO BEACH, FL 33069 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 E. BRAWER PRES 04/24/2008