

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46451

FILED
Apr 06, 2009
Secretary of State

Entity Name: MISHKAN DAVID, INC.

Current Principal Place of Business:

4361 ROCK ISLAND RD.
LAUDERHILL, FL 33319 US

New Principal Place of Business:

Current Mailing Address:

4361 ROCK ISLAND RD.
LAUDERHILL, FL 33319 US

New Mailing Address:

FEI Number: 65-0302415

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SIMKIN, GABRIEL
13352 SW 21ST STREET
MIRAMAR, FL 33027 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: SIMKIN, GABRIEL,
Address: 13352 SW 21ST STREET
City-St-Zip: MIRAMAR, FL 33027

Title: VPD () Delete
Name: SIMKIN, ESTHER
Address: 13352 SW 21ST STREET
City-St-Zip: MIRAMAR, FL 33027

Title: STD () Delete
Name: SIMKIN, RENE
Address: 5900 NW 44 STREET APT 708
City-St-Zip: LAUDERHILL, FL 33319

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:

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: GABRIEL SIMKIN

PD

04/06/2009

Electronic Signature of Signing Officer or Director

Date