


FILE NOW: FILING FEE IS \$61.25

FILED
Mar 14 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N46910** (8)

1. Corporation Name

SHALOM HOUSE, INC.



Principal Place of Business 1251 SW 66 TERR PLANTATION FL 33317 US	Mailing Address 1251 SW 66 TERR PLANTATION FL 33317-5127 US
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/21/1992	3a. Date of Last Report 03/11/1996
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0318693	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
COHN, L. JERRY 4300 N UNIVERSITY DR SUITE 8-104 LAUDERHILL FL 33351				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City
				FL	85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	<input type="checkbox"/> DELETE		1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	HAMMER, ALAN			1.2 NAME			
STREET ADDRESS	2755 NW 92ND AVE			1.3 STREET ADDRESS			
CITY-ST-ZIP	CORAL SPRINGS FL			1.4 CITY-ST-ZIP			
TITLE	VD	<input type="checkbox"/> DELETE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	THOMAS, ERIKA			2.2 NAME			
STREET ADDRESS	4898 NW 29TH CT			2.3 STREET ADDRESS			
CITY-ST-ZIP	LAUDERDALE LAKES FL			2.4 CITY-ST-ZIP			
TITLE	SD	<input type="checkbox"/> DELETE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	OZER, SONDR			3.2 NAME			
STREET ADDRESS	8871 WILES RD			3.3 STREET ADDRESS			
CITY-ST-ZIP	CORAL SPRINGS FL			3.4 CITY-ST-ZIP			
TITLE	TD	<input type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SUMMERS, ESTELLE			4.2 NAME			
STREET ADDRESS	1510 WHITEHALL DR			4.3 STREET ADDRESS			
CITY-ST-ZIP	FT LAUDERDALE FL			4.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	VORENSKY, NORMAN			5.2 NAME			
STREET ADDRESS	7930 NW 10TH CT.			5.3 STREET ADDRESS			
CITY-ST-ZIP	PLANTATION FL			5.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	GORDON, JUDITH			6.2 NAME			
STREET ADDRESS	8282 NW 38TH ST			6.3 STREET ADDRESS			
CITY-ST-ZIP	SUNRISE FL			6.4 CITY-ST-ZIP			

14. I do 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 the receiver 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 if changed, or on an attachment with an address.

SIGNATURE _____

CR2E037 (9/96)