SECOND NOTICE; CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED NONPROFIT FLORIDA DEPARTMENT OF STATE **CORPORATION** Jul 16 1998 8:00am Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 **DIVISION OF CORPORATIONS** Secretary of State DOCUMENT # N47685 (5) BOCA RATON COMMUNITY ERUV. INC. Principal Place of Business Malling Address 7653 LONDON LANE 7653 LONDON LANE 3. Date Incorporated or Qualified BOCA RATON FL 83433 **BOCA RATON FL 33433** 03/05/1992 4. FEI Number Applied For 65-0200285 Not Applicable 2. Principal Place of Business 2a. Malling Address \$8.75 Additional 5. Certificate of Status Desired 21 26 Fee Required Sulte, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 22 27 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? 23 28 Yes __ No Zip Country Zip Country 8. This corporation owes or has paid the current year intangible 24 25 Yes 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name BIRNBAUM, MARC 82 Street Address (P.O. Box Number is Not Acceptable) 11077 BISCAYNE BLVD. 83 SUITE 301 MIAMI FL 33161 84 City 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 1.1 TITLE DELETE ĵΩ Change Addition NAME BERKOWITZ, JACK 1.2 NAME 7880 CUMMINGS LANE STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE 2.1 TITLE DELETE NAME BRANDER, RABBI KENNETH 2.2 NAME 22 198 HOLY HOCK TR. STREET ADDRESS 2.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 2.4 CITY-ST-ZIP Rabbi Eliyahu Rabovsky Dchange 🗆 Addition TITLE 3.1 TITLE DELETE NAME RABOVSKY, RABBI ELIYAHU 3.2 NAME Napa ct. 7406 CARRICK TERR STREET ADDRESS 3.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE 4.1 TITLE DELETE Change Addition NAME SALAMON, CHANI 4.2 NAME 7653 LONDON LANE STREET ADDRESS 4.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIF 4.4 CITY-ST-ZIP TITLE Fass, Rabbi Joshua 5.1 TITLE DELETE Change Addition NAME 5.2 NAME Andorra Place 7300 STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE 6.1 TITLE DELETE Change Addition NAME 6.2 NAME

6.3 STREET ADDRESS

8.4 CITY-ST-ZIP

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 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:

STREET ADDRESS

CITY-ST-Z#P

ICER OR DIRECTOR