2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2009
Secretary of State

DOCUMENT# N48250

Entity Name: KEDEM COUNSELING CENTER, INC.

Current Principal Place of Business:

3550 BISCAYNE BLVD
STE 308
MIAMI, FL 33137 US

New Principal Place of Business:

Current Mailing Address:

1047 ASTURIA AVE.
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 65-0298192 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KEDEM, ARI
1047 ASTURIA AVENUE
CORAL GABLES, FL 33134 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: D ( ) Delete
Name: KEDEM, LORETTA
Address: 1047 ASTURIA AVE
City-St-Zip: CORAL SPRINGS, FL 33134

Title: D ( ) Delete
Name: KEDEM, SAM
Address: 872 TIMES SQUARE
City-St-Zip: NEW YORK, NY 10108

Title: D ( ) Delete
Name: KEDEM, ARI DR
Address: 1047 ASTURIA AVE.
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: KEDEM, LORETTA
Address: 1047 ASTURIA AVE
City-St-Zip: CORAL GABLES, FL 33134

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: DR. ARI KEDEM, PH.D. DIR. 01/12/2009

Electronic Signature of Signing Officer or Director — Date