

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 02, 2005 8:00 am
Secretary of State

02-02-2005 90039 026 ****61.25

DOCUMENT # N51240

1. Entity Name

YOUNG ISRAEL OF MIAMI BEACH, INC.



Principal Place of Business

Mailing Address

**4221 PINE TREE DR.
MIAMI BEACH FL 33140**

**4221 PINE TREE DR.
MIAMI BEACH FL 33140**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0368749

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LERNER, HERBERT J
777 ARTHUR GODFREY RD.
SECOND FLOOR
MIAMI BEACH FL 33140**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
BOMZER, GARY
4510 N JEFFERSON DR
MIAMI BEACH FL 33140** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
KRUGER, JOEL
4214 POST AVE
MIAMI BEACH FL 33140** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
LYNN, GARY
4703 N BAY RD
MIAMI BEACH FL 33140** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ABRAMOWITZ, DAVID
4525 NAUTILUS
MIAMI BEACH FL 33140** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
REIZ, LENNY
2633 PINE TREE
MIAMI BEACH FL 33140** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
LEFKOWITZ, MICHAEL
2990 FLAMINGO DR
MIAMI BEACH FL 33140** ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D Jay Schechter
4333 North Jefferson Ave
Miami Beach, FL 33140** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
HERBERNER
777 ARTHUR GODFREY RD
MIAMI BEACH, FL 33140** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
HERBERNER
777 ARTHUR GODFREY RD
MIAMI BEACH, FL 33140** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
HERBERNER
777 ARTHUR GODFREY RD
MIAMI BEACH, FL 33140** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
HERBERNER
777 ARTHUR GODFREY RD
MIAMI BEACH, FL 33140** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
HERBERNER
777 ARTHUR GODFREY RD
MIAMI BEACH, FL 33140** ☐ Change ☒ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Michael Lefkowitz* **MIHAEL LEFKOWITZ** 1/26/05 (305) 345-3407
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #