

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000622

FILED
Jan 18, 2009
Secretary of State

Entity Name: THE CHEDER, INC.

Current Principal Place of Business:

1081 NE 175TH ST.
N MIAMI BEACH, FL 33162 US

New Principal Place of Business:

Current Mailing Address:

1081 NE 175TH ST.
N. MIAMI BCH., FL 33162 US

New Mailing Address:

FEI Number: 65-0376489

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HELLINGER, HILLEL
1081 NE 175 ST.
N MIAMI BEACH, FL 33162 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: HELLINGER, HILLEL
Address: 1081 N E 175TH STREET
City-St-Zip: N MIAMI BEACH, FL

Title: VD () Delete
Name: KOPELMAN, JEFF
Address: 840 NE 171 ST.
City-St-Zip: N MIAMI BEACH, FL

Title: VD () Delete
Name: NARKES, ABRAHAM
Address: 20021 NE 21ST AVE.
City-St-Zip: N MIAMI BEACH, FL

Title: TD () Delete
Name: BONNARDEL, KEN
Address: 20130 NE 26 AVE
City-St-Zip: N MIAMI BEACH, FL 33180

Title: SD () Delete
Name: GORIN, MOISES
Address: 21151 NE 21 PLACE
City-St-Zip: N MIAMI BEACH, FL 33179

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:

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: HILLEL HELLINGER

PD

01/18/2009

Electronic Signature of Signing Officer or Director

Date