2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # N9300001008 Aug 31, 2000 8:00 am Secretary of State 1. Entity Name AISH HATORAH JERUSALEM FUND. INC. 08-31-2000 90103 034 ****61.25 Mailing Address Principal Place of Business 3414 PRAIRIE AVE. 3414 PRAIRIE AVENUE MIAMI BEACH FL 33140 MIAMI BCH. FL 33140-3429 RUUFTUUR US 2. Principal Place of Business 3. Mailing Address 3150 Sheridan 3150 Sheridan Me<u>nse</u> Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Miami. City & State ろろ140 Applied For City & State 4. FEI Number B<u>eac</u> 65-0389241 Not Applicable Country Country Zip __ \$8.75 Additional 5. Certificate of Status Desired USA USA Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) TERREMARK CORPORATES AGENTS INC. 2601 S. BAYSHORE DR. PENTHOUSE ONE B Zip Code City **MIAMI FL 33133** FL 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State After September 13, 2000 min, will be \$236.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Delete TITLE Rebb! Kalman Packoux ☐ Addition NAME PACKOUZ, RABBI K NAME 3150 Sheridan Avenue STREET ADDRESS STREET ADDRESS 290 N.W. 165 ST., P-500 Miani Beach, FC 33140 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33169 ☐ Change ☐ Addition ☐ Delete TITLE TITLE WEISS, JEFFREY J NAME NAME STREET ADDRESS 6262 SUNSET DR., PH 254 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33143 ☐ Change ☐ Addition ☐ Delete TITLE TITLE BERNSTEIN, RICHARD N NAME NAME % 2601 S. BAYSHORE DR., PH 1-B STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33133 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

nt with an address, with all other

SIGNATURE: