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May 14 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N93000005015 (3)

1. Corporation Name

CHABAD HOUSE OF NORTH DADE, INC.

Principal Place of Business

Mailing Address

21001 BISCAYNE BLVD.  
NORTH MIAMI BEACH FL 33180

21001 BISCAYNE BLVD.  
NORTH MIAMI BEACH FL 33180-1408



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25 9. Name and Address of Current Registered Agent

30 3. Date Incorporated or Qualified 11/02/1993  
3a. Date of Last Report 07/12/1996  
4. FEI Number 65-0455721  
5. Certificate of Status Desired [ ] \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution [ ] \$5.00 May Be Added to Fees  
8. This corporation has Liability for intangible tax under s. 199.032 Florida Statutes [ ] Yes [X] No  
10. Name and Address of New Registered Agent

SINGER, STANLEY  
21001 BISCAYNE BLVD.  
NORTH MIAMI BEACH FL 33180

81 Name

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

83

84 City

FL 85 Zip Code

1. 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 by parties named in registered agent and director's block

(Block 13 registered agent and director's block)

DAH

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE [ ] DELETE  
NAME SINGER, STANLEY  
STREET ADDRESS 21001 BISCAYNE BLVD.  
CITY - ST - ZIP NORTH MIAMI BEACH FL 33180  
TITLE [ ] DELETE  
NAME GORIN, MENDI  
STREET ADDRESS 21001 BISCAYNE BLVD.  
CITY - ST - ZIP NORTH MIAMI BEACH FL 33180  
TITLE [ ] DELETE  
NAME ADOUTH, RAPHAEL  
STREET ADDRESS 21001 BISCAYNE BLVD.  
CITY - ST - ZIP NORTH MIAMI BEACH FL 33180  
TITLE [ ] DELETE  
NAME BONNERDEL, KENNY  
STREET ADDRESS 21001 BISCAYNE BLVD.  
CITY - ST - ZIP NORTH MIAMI BEACH FL 33180  
TITLE [ ] DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
TITLE [ ] DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

1. TITLE [ ] Change [ ] Addition  
2. NAME  
3. STREET ADDRESS  
4. CITY - ST - ZIP  
5. TITLE [ ] Change [ ] Addition  
6. NAME  
7. STREET ADDRESS  
8. CITY - ST - ZIP  
9. TITLE [ ] Change [ ] Addition  
10. NAME  
11. STREET ADDRESS  
12. CITY - ST - ZIP  
13. TITLE [ ] Change [ ] Addition  
14. NAME  
15. STREET ADDRESS  
16. CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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; if 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:

*[Handwritten signatures and dates]*

CR2E037 (9/96)