FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9300005454 (4)

YOUNG ISRAEL OF AVENTURA INC.

Principal Place of Business Malling Address					
2956 AVENTUR	A DIM	2956 AVENTURA BLVD.			
AVENTURA FL			2900 AVENTURA BLVD. AVENTURA FL 33180-3118		·
					3. Date Incorporated or Qualified 3a. Date of Last Report 02/29/1996
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number Applied For
21		26			65-0454808 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
City & State		City & State			Fee Required
23		28			Election Campaign Financing Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cou	ntry	This corporation has liability for intangible tax under s. 199.032,
24	25	29	30	•	Florida Statutes Yes No
	9. Name and Address of Curren		11		10. Name and Address of New Registered Agent
				81 Name	e
GOLDMA	N, JEROME			82 Street	et Address (P.O. Box Number is Not Acceptable)
20281 EAST COUNTRY CLUB DR				O# SHOOK	A Address (F.O. Box Number is Not Addeptable)
AVENTURA FL 33180			ı	83	
,,,,,,,,,,	•		· •	84 City	Incl. 7% Code
				City	FL 85 Zip Code
11. 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 or printed name of registered age	int and title if applicable. (NO	TE: Registered	Agent signatur	ure required when reinstaling) DATE
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	VPD	☐ DELETE	1.1 T/T	LE	PRESIDENT - PIRECTOR . Change Addition
NAME	STURTZ, NOEL		1.2 NA	ME .	JOHANE GOLOMAN
STREET ADDRESS	20185 E. COUNTRY CLUB DE	RIVE #303	1.3 ST	REET ADDRESS	
CITY - ST - ZIP	AVENTURA FL		1.4 CD	Y-ST-ZIP	AVIENTURA, FL 33/80
TITLE	VPDT	DELETE	2.1 111		☐ Change ☐ Addition
NAME	BERSSON, DAVID	•	22 NA	ME ·	
STREET ADDRESS	19707 TURNBERRY WAY		2.3 \$T	EET ADDRESS	s I
City-St-Zip	N. MIAMI BEACH FL	_	2.4 CI	IY-ST-ZIP	week and the second of the sec
TITLE	VPDT	DELETE	31 TIT	LE	Change Addition
NAME	BRENNER, MICHAEL	/>	3.2 NA	ME	
STREET ADDRESS	3300 NE 192ND STREET #80	7	3.3 ST	REET ADDRESS	s
CITY-S1-ZIP	AVENTURA FL		3.4. CI	IY-ST-ZIP	
TIRE	STD	DELETE	4.1 Tit		Change Addition
NAME	STERENTAL, PAUL		4.2 N	ME	
STREET ADDRESS	19195 MYSTIC POINT DRIVE		4.3 ST	LEET ADDRESS	s
CITY-ST-ZIP	N. MIAMI BEACH FL		1	Y-ST-ZIP	
TITLE	· · · · · · · · · · · · · · · · · · ·	☐ DELETE	5.1 TIT		Change Addition
NAME			5.2 NA	ME	
STREET ADDRESS			5.3 ST	REET ADDRESS	s
CITY-ST-ZIP			1	Y-ST-ZIP	
TITLE		☐ DELETE	6.1 TIT		☐ Change ☐ Addition
NAME			6.2 NA	ME	·
STREET ADDRESS			1	EET ADDRESS	s
CIFY-ST-ZIP			•	Y-ST-ZIP	·

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). 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; that I am an officer or director of the corporation or the receiver or trustee empowers 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:

SIGNATURE AND TYPED ON PRINTED NAME OF HOMING OFFICER OR DIRECTOR

1/2 7/97

984-976-6760 Daytime Phone # 0033453

FILED

Feb 18 1997 8:00am

Secretary of State

32E037 (9/96)