

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000000160

1. Entity Name

CONGREGATION AHAVAS YISRAEL CORPORATION

Principal Place of Business

708 LAKE HOWELL RD.  
MAITLAND FL 32751  
US

Mailing Address

708 LAKE HOWELL RD.  
MAITLAND FL 32751-5220  
US

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

59-3222318

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

DUBOV, SHOLOM B.  
642 GREEN MEADOW AVE.  
MAITLAND FL 32751

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.

SIGNATURE *[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

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Delete  
NAME BEN BROLY  
STREET ADDRESS 204 ESPLANADE WAY #100  
CITY-ST-ZIP CASSELBERRY FL 32707

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME BECKER, MIRIAM  
STREET ADDRESS 840 WEST FOREST BROOK ROAD  
CITY-ST-ZIP MAITLAND FL 32751

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Delete  
NAME COOPER, SHELDON  
STREET ADDRESS 682 GREEN MEADOW AVE  
CITY-ST-ZIP MAITLAND FL 32751

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME DANZIGER, DAVID JUDGE  
STREET ADDRESS 2015 VENETIAN WAY  
CITY-ST-ZIP WINTER PARK FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME HARA, ROBERT  
STREET ADDRESS 118 NORTH WYMORE ROAD  
CITY-ST-ZIP WINTER PARK FL 32789

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME DUBOV, SHOLOM B  
STREET ADDRESS 642 GREEN MEADOW AVE  
CITY-ST-ZIP MAITLAND FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED  
Jan 19, 2000 8:00 am  
Secretary of State

01-19-2000 90180 042 \*\*\*\*61.25

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DO NOT WRITE IN THIS SPACE

CR2E037 (9/99)