

2001 UNIFORM BUSINESS REPORT (UBR)

2/2

FILED
Mar 08, 2001 8:00 am
Secretary of State

02-20-2001 90090 025 ****61.25

DOCUMENT # N94000000160

1. Entity Name

CONGREGATION AHAVAS YISRAEL CORPORATION

Principal Place of Business

Mailing Address

708 LAKE HOWELL RD.
 MAITLAND FL 32751
 US

708 LAKE HOWELL RD.
 MAITLAND FL 32751
 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 **Lenard Persin**

Street Address (P.O. Box Number is Not Acceptable)
708 Lake Howell Road

Maitland

City

FL

Zip Code
32751

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

Lenard Persin

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/03/2001

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

TITLE **P** ☐ Change ☒ Addition
 NAME **Persin, Lenard**
 STREET ADDRESS **501 Brookside Circle**
 CITY-ST-ZIP **Maitland, FL 32751**

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

TITLE **D** ☐ Change ☒ Addition
 NAME **Dahan, Yaela**
 STREET ADDRESS **9911 Burling Way**
 CITY-ST-ZIP **Orlando, FL 32817**

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

TITLE **D** ☐ Change ☒ Addition
 NAME **Flax, David**
 STREET ADDRESS **106 Village Lane**
 CITY-ST-ZIP **Winter Park, FL 32792**

TITLE **P** ☒ 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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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: *Lenard Persin* REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/13/2001 (407)
644-2500
 Date Daytime Phone #

CR2E037 (10/00)