## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # N9400000697

1. Corporation Name

SEPHARDIC JEWISH CENTER OF SOUTH FLORIDA, INC.

Principal Place of Business 20423 STATE RD. 7 **SUITE 6297 BOCA RATON FL 33498** 

2. Principal Place of Business

Mailing Address 20423 STATE RD. 7

**SHITE 6297** 

2a. Mailing Address

**BOCA RATON FL 33498** 

## FILED Apr 20, 1999 8:00 am § Secretary of State

04-20-1999 90035 034 \*\*\*\*61.25



3. Date incorporated or Qualifed

Suite, Apt. #, etc.  2	21	ace of Dusiness	26					02/10/1994			
City & State		# etc.	1					4. FEI Number		Apr	olied For
City & State    City & State   City & State   City & State   St. Certificate of Status Desired   \$8.75 Additional Fee Required	22		<u>├</u> ──		·- ·-		-  -	~~65-0468538		Not	Applicable
Security   Zip   Country   Zip   Country   Security		3		state				5 0 - 1/2 - 1 - 1 0 - 1 - 1	П	\$8.75 A	dditional
Zip   Country   Zip   Country   Zip   Country   Zip   Country   S. 5.00 May Se   Added to Fees   S. 128   38   30   S. Name and Address of Current Registered Agent   St. Name	23		28					Centicate of Status Desired	<u>ب</u>	Fee Red	quired
9. Name and Address of Current Registered Agent  FELDMAN, MCIHEAL J CPA 500 NE SPANISH RIVER BLVD  STE 205  BOCA RATON FI. 33331  10. Name and Address of New Registered Agent  FELDMAN, MCIHEAL J CPA 500 NE SPANISH RIVER BLVD  STE 205  BOCA RATON FI. 33431  14		Country	Zip		Country			6. Election Campaign Financing	9 🗂	\$5.00	May Be
9. Name and Address of Current Registered Agent    1	24	25	29	30				Trust Fund Contribution		Added to	o Fees
FELDMAN, MCIHEAL J CPA 500 NE SPANISH RIVER BLVD SITE 205 BOCA RATON FL 33431  11. Pursuant to the provisions of Sections 617 0502 and 617 1508, Florida Statutuse, 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, and familiar with, and accept the obligations of, Section 617 0503, Florida Statutuse.  SIGNATURE  Signature, yeard or printed name of registered agent larger and tills if applicable.  NOTE: Registered Agent agents in an international statutuse.  SIGNATURE  Signature, yeard or printed name of registered agent agent larger and tills if applicable.  NOTE: Registered Agent agents in an international statutuse.  SIGNATURE  Signature, yeard or printed name of registered agent agent larger agent		9. Name and Address of Current	Registered Ag	ent			1	0. Name and Address of New	Registered /	Agent	
SOO NE SPANISH RIVER BLVD STE 206 BDCA RATON FL 33431  44 City  FL 85 Zip Code  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Flonds 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 femiliar with, and accept the obligations of, Section 617.0503, Flonda Statutes.  SIGNATURE  Signature, typed or primar name of ingitizered agent and stills it propriates.  (INOTE Registered Agent agent and stills it propriates.)  (INOTE Registered Agent agent and stills it propriates.)  (INOTE Registered Agent agent and stills it propriates.)  ITILE  PD  OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  ITILE  PD  ORACLE STREET ADDRESS  OCTY-ST-2P  PARKLAND FL  OPECK, DAVID  OPECKES COVE  13. STREET ADDRESS  OCTY-ST-2P  AND DELETE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  ITILE  OCHANGE AGENT AG					81	Name					
SOO NE SPANISH RIVER BLVD STE 206 BDCA RATON FL 33431  44 City  FL 85 Zip Code  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Flonds 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 femiliar with, and accept the obligations of, Section 617.0503, Flonda Statutes.  SIGNATURE  Signature, typed or primar name of ingitizered agent and stills it propriates.  (INOTE Registered Agent agent and stills it propriates.)  (INOTE Registered Agent agent and stills it propriates.)  (INOTE Registered Agent agent and stills it propriates.)  ITILE  PD  OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  ITILE  PD  ORACLE STREET ADDRESS  OCTY-ST-2P  PARKLAND FL  OPECK, DAVID  OPECKES COVE  13. STREET ADDRESS  OCTY-ST-2P  AND DELETE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  ITILE  OCHANGE AGENT AG	FELDMAN MOIHEAL J. CPA					Street	Address	(P.O. Box Number is Not Accer	otable)		
STE 205 BOCA RATON FL 33431  44 City FL 85 Zip Code  45 City FL 85 Zip Code  46 City FL 85 Zip Code  47 City FL 85 Zip Code  48 City FL 85 Zip Code  4						040017	7,001000	(1 :0: DOX (VEX.)DO ID (VEX.)			
BOCA RATON FL 33431  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, and accept the obligations of, Section 617.0502 and accept the obligations of, Section 617.0503, Florida Statutes.  In a finalizar with, and accept the obligations of, Section 617.0503, Florida Statutes.  It is a finalizar with, and accept the obligations of, Section 617.0503, Florida Statutes.  It is a finalizar with an accept the obligations of, Section 617.0503, Florida Statutes.  It is a finalizar with a finalizar with a finalizar well with a corporation's board of directors. I hereby accept the appointment as registered and accept the obligations of, Section 617.0503, Florida Statutes.  It is a finalizar with a corporation's board of directors. I hereby accept the appointment as registered and the corporation's board of directors. I hereby accept the appointment as registered and the corporation's board of directors. I hereby accept the appointment as registered and the corporation's board of directors. I hereby accept the appointment as registered and the corporation's board of directors. I hereby accept the appointment as registered and the corporation's board of directors. I hereby accept the appointment as registered and the corporation's board of directors. I hereby accept the appointment as registered and the corporation's board of directors. I hereby accept the appointment as registered and discrete depiction's and the corporation's board of directors. I hereby accept the appointment as registered and discrete depiction's and the corporation's board of directors. I hereby accept the appointment as registered and discrete depiction's and the corporation's accept the appointment as registered and discrete depiction's and the c											
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SIGNATURE	office or re	edistared agent, or both, in the State o	t Florida. Such	cnange was aนนา	ionzed by i	ine corpo	oration's	board of directors. I hereby acc	ept the appoir	ıtment as reç	jistered
Signature, syned or printed name of registered agent and tills if application. (NOTE: Registered Agent agents with an including).  I. OFFICERS AND DIRECTORS  I. S. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PD WESDD, ANDREW STREET ADDRESS OVE 13 STREET ADDRESS OVE 14 CITY-ST-ZIP  TITLE D WESDD, ANDREW 14 CITY-ST-ZIP  TITLE D WESDD, ANDREW 15 TITLE D WESDD, ANDREW 16 CYPRESS COVE 17 TITLE D WESDD, ANDREW 18 TITLE D WESDD, ANDREW 19 TITLE D WESDD, ANDREW 19 TITLE D WESDD, ANDREW 10 DELETE 11 TITLE D WESDD, ANDREW 10 DELETE 21 TITLE 22 VANAE 22 VANAE 22 VANAE 23 STREET ADDRESS COVE 24 CITY-ST-ZIP P HAKIM, ESTER 3170 NAMDER AVE 34 CITY-ST-ZIP TITLE D WESDD, ANDREW 17 NAME 18 TITLE D WESDD, ANDREW 18 TITLE D WESDD, ANDREW 19 Change Addition Additio	agent. I ar	m familiar with, and accept the obligati	ons of, Section	617.0503, Florida	a Statutes.						
12.	SIGNATURE	Standard transfer pointed name of registered agent	and title if anningble	(NOTE: Re	oistered Agen	signature n	required why	en reinstating)	DATE	· · · · · ·	
TITLE				(1.5.2.					FFICERS AN	D DIRECTO	RS IN 12
NAME	· · · · · · · · · · · · · · · · · · ·				1,1 TITLE					Change	Addition
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DAMBEACH GARDENS FL	1				1.3 STREET	ADDRESS					
TITLE	<b>\</b>						-	•			
NAME   DWECK, DAVID   22 NAME   23 STREET ADDRESS   6146 NW 66TH AVE   23 STREET ADDRESS   2.4 CITY-ST-ZIP   PARKLAND-FL   2.4 CITY-ST-ZIP	<del></del>			☐ DELETE			†			Change	Addition
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	14. I berehu d	partify that the information sumplied with	h this filing does	not qualify for th			d in Sec	tion 119.07(3)(i). Florida Statute	s. I further cer	tify that the is	nformation

indicated on this annual report or supplemental annual report is true and accurate and that my signature shall be the same legal effect as if made under oath; that I am are officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Ctrapter 877, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.