## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N9400002680

FILED Feb 19, 2009 Secretary of State

Entity Name: TORAS EMES DEVELOPMENT COMPANY, INC.

Current Principal Place of Business:			New Princi	New Principal Place of Business:		
	IAMI BEACH BLVD. IIAMI BEACH, FL 33	162				
Current Mailing Address:			New Mailir	New Mailing Address:		
	//II GARDENS DR IIAMI BEACH, FL 33	179				
FEI Number:	: 65-0494823 FEI	Number Applied For()	FEI Number Not Appli	cable ( ) Certifica	te of Status Desired ( )	
Name and	l Address of Curren	t Registered Agent:	Name and	Address of New Reg	stered Agent:	
	ST ACH, FL 33140 U	S s this statement for the p	ourpose of changing it	s registered office or re	egistered agent, or both.	
	e of Florida.	•	, 33	9	<i>3</i> , , ,	
SIGNATU						
	_	nature of Registered Age			Date	
OFFICER	S AND DIRECTORS	:	ADDITION	S/CHANGES TO OFF	ICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	D () Delete LEHRFIELD, MOSHE 1310 NE 173 ST N MIAMI BEACH, FL 3	RABBI	Title: Name: Address: City-St-Zip:	()Change(	) Addition	
Title: Name: Address: City-St-Zip:	D () Delete JACOB, ALLAN DR 536 W 47 ST MIAMI BEACH, FL 33		Title: Name: Address: City-St-Zip:	()Change(	) Addition	
Title: Name: Address: City-St-Zip:	D () Delete PEPPARD, TUVIA DR 4350 N JEFFERSON A MIAMI BEACH, FL 33	VE	Title: Name: Address: City-St-Zip:	D-P (X) Change (PEPPARD, TUVIA DR. 4350 N JEFFERSON AVE MIAMI BEACH, FL 33140	) Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete MORDECHAI PALGON 17601 N E 7 AVE MIAMI, FL 33162		Title: Name: Address: City-St-Zip:	()Change(	) Addition	
Title: Name: Address: City-St-Zip:	D () Delete LUBAN, BINYOMIN RA 930 NE 175 STREET MIAMI, FL 33162		Title: Name: Address: City-St-Zip:	( ) Change(	) Addition	
Title: Name: Address: City-St-Zip:	D () Delete NIMAN, YISROEL RAE 4595 NAUTILUS CT MIAMI BEACH, FL 33	BBI	Title: Name: Address: City-St-Zip:	()Change(	) Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RABBI YISROEL Y. NIMAN DEAN 02/19/2009