	, PLEASE READ				OMPLET	ING THIS FO	RM.		
	PLICATION FOR STATEMENT		A DEPARTME Sandra B. Mol Secretary of S	r tham State		FILI	ĒD		
DOCUMENT # N9400005158						97 AUG 29 AH 11: 27			
1. Corporat THE	INTERICAN, LISRAEL	FTEE, INC	TEE, INC. SECREMAN OF STATE TALLAHASSEE, FLORIDA						
3300	ace of Business 0 N.E. 16th Street t Lauderdale, FL 333	•	ピノo Robert PiOl Box 42 Fort Lauder	40					
2. New Prin	ncipal Office Address, If Applicable	3. New Mail	igh incorrect information and enter correction below. 3. New Mailing Office Address, If Applicable			4. Date Incorporated or Qualified To Do Business in Florida 10/17/94			
Suite, Apt. #		Suite, Apl. #, etc.			5. FEI Number X Applied For				
City & State Zip Country		City & State Zip			6. CERTIFICATI	Not Applicable FICATE OF STATUS DESIRED S8.75 Additional Fee require for a Certificate of Status			
7. Names a	and Street Addresses of Each Olficer and	/or Director (Fic	orida nonprofit corpora	ations must list at lea				ate or Status	
Title(s) 1	Name of Officers and/or Directors 2		Str	reet Address of Each flicer and/or Director se Post Office Box N	1	4 0	Sity / State / Zip		
D	ROBERT LOCKWOOD	ROBERT LOCKWOOD 3300 NE:1				Fort Lauder	dale, FL	33304	
D	ED KENNEDY Clerk of			Courts		Fort Laude	erdale. Fl	3330	
D	ABE FISCHLER		School B	201 S.E. 6th Street, RM 278 Fort Lauderdale, FL 3330 School Bd. of Broward County Fort Lauderdale, FL 3330 600 S.E. Third Avenue					
			REINS	TATEN	IENT_	16-97			
						5L	8-29	-97	
6. Name and Address of Current Registered Agent Nam					9. Name and Address of New Registered Agent ame				
Peter A. Quinter 3111 Stirling Road Street A					et Address (P.O. Box Number is Not Acceptable)				
Fort Lauderdale, FL 33312				Suite, Apl. #, Etc. SONNO2281695					
		-08/29/9701116001- *****29701116001- *****29701							
10. I, being Signature of Registered A	Agent	dure	OTATION IN TAMILIAR W	ith and accept the ob	oligations of Secti	on 607.0505, F.S. Date	8/97	·····	
11. Do De	es this corporation pay a pt. of Revenue under S.	any intang 199.032,	gible tax to th Florida State	ie utes. Yes [her side for inform n intangible tax.)	ation	
this reins owed by	that I am an officer or director or the receist statement application, the reason for disso the corporation have been paid and the pplication is true and accurate, and my si URE: BIONATURE AND TYPED OR PRI	olution has been names of Individ	eliminated, the corpo luals listed on this for	prate name satisfies t m do not qualify for a	the requirements an exemption und	of section 607.0401 or	617.0401 F.S., th	at all fees	