## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000005298

FILED Mar 24, 2005 Secretary of State

Entity Name: CHABAD OCEAN SYNAGOGUE, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1295 EAST HALLANDALE BEACH BLVD. 3800 S. OCEAN DRIVE HALLANDALE, FL 33009 HOLLYWOOD, FL 33019 **Current Mailing Address:** New Mailing Address: 1295 EAST HALLANDALE BEACH BLVD. 541 MONTGOMERY ST. HALLANDALE, FL 33009 BROOKLYN, NY 11225 FEI Number: 65-0805511 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HODKIN, PETER M 2101 WEST COMMERCIAL BLVD **SUITE 4100** FORT LAUDERDALE, FL 33309 US 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: Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete () Change () Addition SPIVAK, ALLAN Name: Name: 4000 SOUTH OCEAN DRIVE Address: Address: City-St-Zip: HOLLYWOOD, FL 33019 City-St-Zip: Title: Title: (X) Change ( ) Addition ( ) Delete BONNARDEL, KENNETH Name: Name: KUDAN, MENASHE L Address: 20130 N.E. 26TH AVE. Address: 1245 RODMAN STREET City-St-Zip: NORTH MIAMI BEACH, FL 33180 City-St-Zip: HOLLYWOOD, FL 33019 Title: DV () Delete Title: () Change () Addition KUDAN, DAVID Name: Name: 1245 RODMAN STREET Address: Address: City-St-Zip: HOLLYWOOD, FL 33019 City-St-Zip: ( ) Delete Title: Title: (X) Change ( ) Addition LOKEINSKY, SHULAMIS Name: SCHWARTZ, MOSHE Name: 541 MONTGOMERY STREET Address: 1108 N.E. 5TH ST. Address: City-St-Zip: HALLANDALE, FL 33009 City-St-Zip: BROOKLYN, NY 11225

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SHULAMIS LOKEINSKY S 03/24/2005