2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005298

FILED Jun 29, 2007 Secretary of State

Entity Name: CHABAD OCEAN SYNAGOGUE, INC.

Current P	Principal Place of Business:	New Principal Place of Business:	
	CEAN DRIVE DOD, FL 33019	7 SEACREST PARKWAY HOLLYWOOD, FL 33019	
Current N	Mailing Address:	New Mailing Address:	
	TGOMERY ST. /N, NY 11225		
	:: 65-0805511 FEI Number Applied For () nce with s. 607.193(2)(b), F.S., the corporation d	FEI Number Not Applicable () Certificate of Status I	Desired ()
lame and	d Address of Current Registered Agent	: Name and Address of New Registered Ag	ent:
2101 WES SUITE 410	PETER M ST COMMERCIAL BLVD 00 JDERDALE, FL 33309 US		
	e named entity submits this statement for t e of Florida.	ne purpose of changing its registered office or registered a	gent, or both
n the Stat	e of Florida.	ne purpose of changing its registered office or registered a	gent, or both
the Stat	e of Florida.		gent, or both
n the Stat SIGNATU	e of Florida.		
n the Stat SIGNATU DFFICER itle: ame: ddress:	e of Florida. RE: Electronic Signature of Registered	Agent Date	
n the Stat dIGNATU DFFICER itle: aame: ddress: ity-St-Zip: itle: aame: ddress:	e of Florida. RE: Electronic Signature of Registered S AND DIRECTORS: DP () Delete SPIVAK, ALLAN 4000 SOUTH OCEAN DRIVE	Agent Date ADDITIONS/CHANGES TO OFFICERS AN Title: () Change () Addition Name: Address:	
n the Stat SIGNATU	e of Florida. RE: Electronic Signature of Registered S AND DIRECTORS: DP () Delete SPIVAK, ALLAN 4000 SOUTH OCEAN DRIVE HOLLYWOOD, FL 33019 DT () Delete KUDAN, MENASHE L 1245 RODMAN STREET	Agent Date ADDITIONS/CHANGES TO OFFICERS AN Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:	

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: DAVID KUDAN DV 06/29/2007