

FILED
Feb 19, 1999 8:00am
Secretary of State

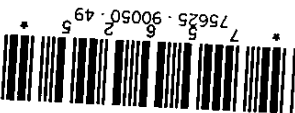
02-19-1999 00050 0049

REQUIRED
SIGNING OFFICER OR DIRECTOR

not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an address, with all other like empowered.

2/2/99
365-534-2002

1. CORPORATION NAME		DOCUMENT # N95000000238		1999		NONPROFIT CORPORATION ANNUAL REPORT		FLORIDA DEPARTMENT OF STATE		Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
1. Corporation Name		TEMPLE BETH RAPHAEL, INC.		Principal Place of Business		1545 JEFFERSON AVENUE MIAMI BEACH FL 33139		Mailing Address		1910 ALTON RD MIAMI BEACH FL 33139 US	
2. Principal Place of Business		2a. Mailing Address		21. Suite, Apt. #, etc.		22. City & State		23. Zip		24. Country	
25. Country		26. City & State		27. Zip		28. Country		29. City		30. State	
3. Date Incorporated or Qualified		4. FEI Number		5. Certificate of Status Desired		6. Election Campaign Financing		7. Trust Fund Contribution		8. Name and Address of Current Registered Agent	
01/13/1995		59-1155116		Not Applicable		Applied For		Not Applicable		Applied For	
9. Name and Address of New Registered Agent		10. Name and Address of Current Registered Agent		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 agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.		12. SIGNATURE		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		14. DATE	
TALMUDIC COLLEGE OF FLORIDA 1910 ALTON ROAD MIAMI BEACH FL 33139		PD HILL, IRA 1910 ALTON ROAD MIAMI BEACH FL		STD VITZCHAK, ZWIEG 2033 N BAY RD MIAMI BEACH FL		AVD SIMON, MILTON 1910 ALTON ROAD MIAMI BEACH FL		DELETE		DELETE	
1.1 TITLE		1.2 NAME		1.3 STREET ADDRESS		1.4 CITY-ST-ZIP		2.1 TITLE		2.2 NAME	
2.3 STREET ADDRESS		2.4 CITY-ST-ZIP		3.1 TITLE		3.2 NAME		3.3 STREET ADDRESS		3.4 CITY-ST-ZIP	
4.1 TITLE		4.2 NAME		4.3 STREET ADDRESS		4.4 CITY-ST-ZIP		5.1 TITLE		5.2 NAME	
5.3 STREET ADDRESS		5.4 CITY-ST-ZIP		6.1 TITLE		6.2 NAME		6.3 STREET ADDRESS		6.4 CITY-ST-ZIP	
7. Change		8. Addition		9. Change		10. Addition		11. Change		12. Addition	



DOCUMENT . 4

FILE NOW: FILING FEE IS \$61.25



CR2E037 (11/98)

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