## **2000 UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE:

## Jan 20, 2000 8:00 am Secretary of State DOCUMENT # N9500000631 01-20-2000 90085 032 \*\*\*\*61.25 FLORIDA-ISRAEL CHAMBER OF COMMERCE EDUCATIONAL I Principal Place of Business Mailing Address 225 SOUTH FEDERAL HWY. 225 SOUTH FEDERAL HWY. 2ND FLOOR 2ND FLOOR 00005719 DEERFIELD BEACH FL 33441 DEERFIELD BEACH FL 33441-4129 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number City & State Applied For 65-0563034 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) RUDDY, CHARLES J 225 S FEDERAL HIGHWAY 2ND FLOOR City Zio Code **DEERFIELD BEACH FL 33441** 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: **\$5.00** May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 19 10. OFFICERS AND DIRECTORS ☐ Change Delete Addition TITLE TITLE Feldenkreis, OSCER 3000 HW 107 H AVE RUDDY, CHARLES J NAME NAME STREET ADDRESS STREET ADDRESS 225 S. FEDERAL HWY., 2ND FLOOR CITY-ST-7IP CITY-ST-ZIP **DEERFIELD BEACH FL 33441** 🔽 Change TITLE Addition Delete 2101 Corpinere BING, SE. 101 NAME FALIC, SIMON STREET ADDRESS STREET ADDRESS 11701 NW 101 RD OLE RATON FL 33431 CITY-ST-ZIP CITY-ST-ZIP <u> MIAMI-FL: 33178</u> ☐ Change Addition Delete TITLE TITLE NAME SCHAFLER, ALAN L STREET ADDRESS STREET ADDRESS 2035 STAY SAIL LN CITY-ST-ZIP CITY-ST-ZIP JUPITER FL 33477 Delete TITLE NAME NAME HOLTZ, LEÓN STREET ADDRESS STREET ADDRESS 2151 LEJEUNE RD CITY-ST-7IP CITY-ST-ZIP CORAL GABLES FL 33134 ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME BALLEN, SAM STREET ADDRESS STREET ADDRESS 2101 CORPORATE BLVD STE 101 CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33431** ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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 employered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment vitil at address with all other like empowered.

FILED

954-420-5888

Jan 13,2000