


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 04, 2004 08:00 AM
Secretary of State

DOCUMENT # N95000002712


1. Entity Name
THE KABBALAH CENTRE OF FLORIDA, INC.



Principal Place of Business
**8411 PALMETTO PARK RD.
 BOCA RATON, FL 33433**

Mailing Address
**8411 PALMETTO PARK RD.
 BOCA RATON, FL 33433**

DO NOT WRITE IN THIS SPACE



07072004 No Chg-NP CR2E037 (10/03)

4. FEI Number 65-0638140	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**THE KABBALAAH CENTER
 8411 W.PALMETTO PARK RD.
 BOCA RATON, FL 33433**

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
 Due by September 8, 2004**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERG, KAREN 7411 WEST PALMETTO PK RD BOCA RATON, FL 33433
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SARFATI, SHIMON 8411 WEST PALMETTO PK RD BOCA RATON, FL 33433
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SOLOMON, BETTY 1062 S ROBERTSON BLVD LOS ANGELES, CA 90035
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 empowered 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 with an address, with all other like empowered.

SIGNATURE: Rebecca **7/27/04** **561.488.8826**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #