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FILED
Jun 03, 1998 8:00 am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998	FLORIDA DEPARTMENT OF STATE Sandra B. Northing, Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N95000003149(0)

1. Corporation Name
Jewish Young Adult Network, Inc.

Principal Place of Business 9301 SW 92 AVE B 314 Miami, FL 33176 USA	Mailing Address 9301 SW 92 AVE B 314 Miami, FL 33176 USA
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3. Date Incorporated or Qualified
06/30/95

4. FEI Number
65-0591124

Applied For
Not Applicable

2. Principal Place of Business 21 2961 Whitehead St Suite, Apt. #, etc. 22 City & State 23 Coconut Grove, FL 24 Zip 33133 25 Country USA	2a. Mailing Address 26 2961 Whitehead St Suite, Apt. #, etc. 27 City & State 28 Coconut Grove, FL 29 Zip 33133 30 Country USA
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5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
Hirsh, Michael
9301 SW 92 AVE
B 314
Miami, FL 33176

10. Name and Address of New Registered Agent
81 Name HIRSH, MICHAEL
82 Street Address (P.O. Box Number is Not Acceptable) 2961 Whitehead St
83
84 City Coconut Grove FL 85 Zip Code 33133

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 office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Michael G. Hirsh* DATE 4-30-98
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Hirsh, Michael 9301 SW 92 AVE B-314 Miami, FL 33176
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Hirsh, Lisa 9301 SW 92 AVE B-314 Miami, FL 33176
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Swartz, Nadine 9845 SW 126th Terrace Miami, FL 33176
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Feldman, MAURA 7211 SW 62nd AVE, #202 Miami, FL 33143
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	P/D HIRSH, Michael, President/Director 2961 Whitehead St Coconut Grove, FL 33133
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	S/D HIRSH, Lisa, Secretary/Director 2961 Whitehead St Coconut Grove, FL 33133
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	P/D Palowite, Rose, Treasurer/Director 3910 Little Ave Coconut Grove, FL 33133
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	

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14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Michael A. Hirsh* DATE 4-30-98 205-592-4715
SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR