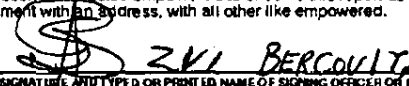


FILED
Apr 03, 2003 8:00 am
Secretary of State

03-10-2003 90177 013 ****61.25

2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000003250					
1. Entity Name TZACH (TZEIREI AGUDAT CHABAD), INC.					
Principal Place of Business 145 EAST FLAGLER ST B-2 MIAMI, FL 33131			Mailing Address 145 EAST FLAGLER ST B-2 MIAMI, FL 33131		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 65-0594319	
				Applied For Not Applicable	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BERCOVITS, ZVI 145 EAST FLAGLER ST B-2 MIAMI, FL 33131				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 re-registering) DATE _____					
FILE NOW FEE IS \$61.25		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
				Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BERCOVITS, ZVI 420 LINCOLN ROAD #347 MIAMI BEACH, FL 33139	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P. Secretary. Director ☒ Change ☐ Addition Bercovits, Zvi 145 E. Flagler St., Suite B-2 Miami, FL 33131	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KLAINBAUM, BRANCHA 100 BAYVIEW DRIVE #706 SUNNY ISLES, FL 33131	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director ☐ Change ☒ Addition Nechama Michal Rosner 19370 Collins Avenue, #416 Aventura, FL 33160	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DERNER, DAVID 420 LINCOLN RD #372 MIAMI BEACH, FL 33139	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director ☐ Change ☐ Addition Klainbaum, Brancha (same)	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEHR, BRUCE 1401 BRICKELL AVENUE MIAMI, FL 33131	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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 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:  ZVI BERCOVITS			3-4-03 (305) 534-4575		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		