

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005793

FILED
Feb 17, 2009
Secretary of State

Entity Name: BIKUR CHOLIM OF HOLLYWOOD INC.

Current Principal Place of Business:

3851 N. 43RD AVENUE
HOLLYWOOD, FL 33021 US

New Principal Place of Business:

Current Mailing Address:

3851 N. 43RD AVENUE
HOLLYWOOD, FL 33021 US

New Mailing Address:

FEI Number: 65-0666442 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLOOMBERG, ALLAN
3900 N. HILLS DR
#303
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GANCHROW, SAUL
Address: 3851 N 43RD AVENUE
City-St-Zip: HOLLYWOOD, FL 33021

Title: VD () Delete
Name: SCHULMAN, JASON
Address: 4104 N 48TH AVENUE
City-St-Zip: HOLLYWOOD, FL 33021

Title: VD () Delete
Name: NIAD, JOAN
Address: 4060 N HILLS DR #24
City-St-Zip: HOLLYWOOD, FL 33021

Title: TD () Delete
Name: BLOOMBERG, ALLAN
Address: 3900 N. HILLS DR #303
City-St-Zip: HOLLYWOOD, FL 33021

Title: SD () Delete
Name: HILLER, DANI
Address: 4000 N. 43RD AVENUE
City-St-Zip: HOLLYWOOD, FL 33021

Title: D () Delete
Name: ABRAMSON, TED
Address: 3900 N. HILLS DR. #110
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAUL M. GANCHROW

PRES

02/17/2009

Electronic Signature of Signing Officer or Director

Date