2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **N9600000207**

1. Entity Name

CONGREGATION B'NAI EMUNAH GROUP, INC.

Principal Place of Business 100 BAYVIEW DRIVE NORTH MIAMI BEACH FL 33160 2. Principal Place of Business		Mailing Address 100 BAYVIEW DRIVE NORTH MIAMI BEACH FL 33160 3. Mailing Address								
							Suite, Apt. #, etc.		Suite, Apt. #, etc	
							City & State		City & State	
Zip	Country	Zip	Country							

FILED Feb 20, 2002 8:00 am Secretary of State

02-20-2002 90065 037 ****66 25

Suite, Apt. #, etc. St		Suite, Apt. #, etc.	uite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE				
City & State C		City & State	City & State			TAI	oplied For		
					4. FEI Number 65-0667051		ot Applicable		
Zip	Country	Zip	Country	5. Certificate of Status		\$8.75 Additional Fee Required			
	6. Name and Address of Current Reg	istered Agent		7. Name and Address of New Registered Agent					
			Name						
PIOTRKOWSKI, JOEL S			Street Add	Street Address (P.O. Box Number is Not Acceptable)					
317 - 17S1	•				.	<u> </u>			
	ACH FL 33141								
			City		FL	Zip Cod	e		
	named entity submits this statement for the	. – – –							
SIGNATURE,	Signature, typed or printed name of registered agent and til		E: Registered Agent signature		DATE				
The second secon					چھار <u>ئے ہیں۔</u> مام Ohalla Ohalla		-		
FILE NOW: FEE IS \$61.25			npaign Financing Contribution. E	\$5.00 May Be Added to Fees	\$5.00 May Be Added to Fees Make Check Payable to Department of State				
10.	OFFICERS AND DIRECT	TORS	11.	ADDITIONS/CHANGES	O OFFICERS AND DIR	ECTORS IN	l 10		
TITLE .	PD	☐ Delete	TITLE	<u>-</u>		☐ Change	Addition		
	rakowski, henry		NAME						
	10101 COLLINS AVENUE, SUITE 7F		STREET ADDRESS						
CITY-ST-ZIP	BAL HARBOUR FL 33154	<u> </u>	CITY-ST-ZIP	<u></u>	<u> </u>				
TITLE	VD	☐ Delete	TITLE			☐ Change	☐ Addition		
	SYLVERMAN, JACK		NAME						
	100 BAYVIEW DRIVE, SUITE 410		STREET ADDRESS						
CITY-ST-ZIP	NORTH MIAMI BEACH FL 33160		CITY-ST-ZIP						

9. Election Campaign Financing \$5.0 FILE NOW: FEE IS \$61.25 П Trust Fund Contribution. Adde OFFICERS AND DIRECTORS ADDIT 10. 11. PD TITLE ☐ Delete TITLE RAKOWSKI, HENRY NAME NAME STREET ADDRESS 10101 COLLINS AVENUE, SUITE 7F STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BAL HARBOUR FL 33154 ☐ Delete TITLE TITLE SYLVERMAN, JACK NAME NAME STREET ADDRESS 100 BAYVIEW DRIVE, SUITE 410 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NORTH MIAMI BEACH FL 33160 ☐ Delete ☐ Change ■ Addition TITLE TITLE KOPERWAS, JULIUS NAME NAME STREET ADDRESS 100 BAYVIEW DRIVE, SUITE 2005 STREET ADDRESS tright property CITY-ST-ZIP CITY-ST-ZIP NORTH MIAMI BEACH FL 33160 ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME ROSENSTEIN, SIDNEY NAME STREET ADDRESS STREET ADDRESS 100 BAYVIEW DRIVE, PH CITY-ST-ZIP CITY-ST-ZIP NORTH MIAMI BEACH FL 33160 TITLE ☐ Delete TITLE ☐ Change ☐ Addition WEISS, NICOLAS D NAME NAME STREET ADDRESS 100 BAYVIEW DR SUITE 1908 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33160 TITLE Delete TITLE FUCHS, LEONARD STREET ADDRESS 100 BAYVIEW DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33160

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:

Febr. 2-02