FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N96000000652 (5)

FILED Jan 30 1998 8:00 am Secretary of State

. Corporatio	in Name	,	- ,				
AHAVAS YISROEL CONGREGATION, INC.							
						È FRANCIUS DIN 1863 NICH NEGO NORM SUM NEGO DE LA COMPANIO DE LA COMPANIO DE LA COMPANIO DE LA COMPANIO DE LA	ı
Principal Place of Business Mailing Address						1 lautitet bie inite ettst edtil eelit eelit natt matt mild ettie ilitiet	
1710 N.E. 191ST STREET 1710 N.E. 191ST STREET						3. Date Incorporated or Qualified	
SUITE 311 SUITE 311						02/07/1996	
NORTH MIAMI BEACH FL 33179 NORTH MIAMI BEACH FL 3			FL 33179			4. FEI Number Applied For	_
•						NOT APPLICABLE Not Applica	
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address			·	
21		26	26			5. Certificate of Status Desired \$8.75 Additional Fee Required	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			6. Election Campaign Financing \$5.00 May Be	
22		27	27		•	Trust Fund Contribution	_
City & State	8	City & State				7. Is this nonprofit corporation a homeowners association?	
23		28			☐ Yes 🗷 No		
Zip	Country	Zip	ļ	ıntry		8. This corporation owes or has paid the current year Intangible	۵۱
24	25	29	30			Personal Property Tax due June 30. Yes No N	1
	9. Name and Address of Curre	nt Registered Agent		- I		10. Name and Address of New Registered Agent	
				81 1	Name 74	EAHORO BROWN POWY B.B.	
BROWN, BERNARD				82 3	Street Addre	ess (P.O. Box Number is Not Acceptable)	_
1710 NE	191 ST				1710 A	E-1965 1831	
311				83			
n miami	BCH FL 33179			84 (City / Ar	1974 REPORT	_
					11 1V 17	FL 23/79	
11. Pursuant	to the provisions of Sections 617.050	2 and 617.1508, Florida St	atutes, the al	oove-n	amed corpo	oration submits this statement for the purpose of changing its register	ad
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named office or registered agent, or both, in the State of Florida. Such change was authorized by the corpuragent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.						on's board or directors, i hereby accept the appointment as registered	•
SIGNATURE	Enward Brown	Pres.				1/23/98	
Signature, typed or printed name of registered agent and little if applicable. (NOTE: I				agistered Agent signature required when reinstating) DATE			_
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	T	⊠ DELETE	2.1 TI		7	CHINDLER PHYLLIS CORRECTION TO NE 191 ST METTIO	•
NAME	SCNIEDER PHYLLIS		1.2 N/		1 7	CHINDLER, THYLLIS CORRECTION	,
STREET ADDRESS				1.3 STREET ADDRESS		10 1 0 191 ST 191 110	
CITY-ST-ZIP	NORTH MIAMI BEACH FL 33			TY-ST-Z	TP P	CRTH MIMM, BEACH, FL 33179	
TITLE	D	☐ DELETE	2.1 11		20	DWN LYDIA Change Addit	ОП
NAME	BRODY, EMANUEL		2.2 NAME 2.3 STREET ADDRESS		DRO	N G G G ST	
STREET ADDRESS	1660 NE 191 STREET, APT 3				DRESS	IN IN PART TO TOTAL	
CITY-ST-ZIP	NORTH MIAMI BEACH FL 33:	179 □ DELETE		2. 4 CITY-ST-ZIP 3.1 TITLE		ORTH MIAMI BEACH, FL 33179	
TITLE	D	☐ pereie				E Change	.011
NAME	ENDZWEIG, WILLIAM		3.2 NA				
STREET ADDRESS	1710 N.E. 191ST STREET, AP		1	REET ADD	- 1		
CITY-ST-ZIP	NORTH MIAMI BEACH FL 331	79 DELETE		TY-ST-Z	ZiP	Channa () Autin	
TITLE	D	LI VELETE	4.1 717			Change Addit	OIL
NAME	KAHAN, MENDEL		4.2 N				
STREET ADDRESS	1710 N.E. 191ST STREET, AP		4.3 \$1	REET ADD	DRESS		ļ
CITY-ST-ZIP	NORTH MIAMI BEACH FL 331	79		ry-st-zi	IP		
TITLE	D	☐ DELETE	5.1 TIT			Change Additi	០រា
NAME	LEVY, RABBI HYMAN	_	5.2 NA				-
STREET ADDRESS	1750 NE 191 STREET APT 31			REET ADE			
CITY-ST-ZIP	NORTH MIAMI BEACH FL 331			(Y-\$T-ZI	IP .		_
TITLE	D	☐ DELETE	6.1 TIT		1	Ll Change Ll Additi	an
NAME	ORGEL, NATHAN		6.2 NA				
STREET ADDRESS	1660 NE 191 ST #307			REET ADD			
CiTY-ST-ZiP	N MIAMI BCH FL 33130	ith this filing does not avail		Y-ST-ZI		Continue 110 07/20/0. Elevide Statutes I further equilibrities that the Information	
14. 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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							
officer or of Block 12 o	director of the corporation or the rece or Block 13 if changed, or on an attac	eiver or trustee empowered chment with an address.	to execute ti	nis rep	ort as requir	red by Chapter 617, Florida Statutes; and that my name appears in	
	A	•					