NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # N9600000652 1. Corporation Name

AHAVAS YISROEL CONGREGATION, INC.

Principal Place of Business
1710 N.E. 191ST STREET
SUITE 311
NORTH MIAMI DEACH EL 23170

1710 N.E. 191ST STREET

SUITE 311

Mailing Address

NORTH MIAMI BEACH EL 33179

## **FILED** Mar 02, 1999 8:00 am § Secretary of State

03-02-1999 90179 046 \*\*\*\*70.00



NORTH WINNIN DENOTITE 55775						,			
2 Descript D	lace of Business	2a. Mailing Address			3. Date Incorporated or Qualifed				
- Principal P	ace of business	26			02/07/1996				
Suite, Apt. #, etc. Suite, Apt. #, etc					4. FEI Number	Applie	ed For		
22			· .		NOT APPLICABLE	- Not A	pplicable		
City & Stat	te	City & State	City & State		5. Certificate of Status Desired	\$8.75 Add	ditional		
23		28			5. Certificate of Status Desired	Fee Requ	iired		
Zip	Country Zip				6. Election Campaign Financing	\$5.00 Ma	ay Be		
24	25 29 30				Trust Fund Contribution	Added to F	Fees		
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registere	d Agent			
			81	Name					
BROWN.	Brown. Bernard				82 Street Address (P.O. Box Number is Not Acceptable)				
1710 NE			83						
311									
N MIAMI BCH FL 33179				City	· · · · · · · · · · · · · · · · · · ·	85 Zip Co	de		
						<u>L</u>			
11. Pursuant	to the provisions of Sections 617.05	02 and 617.1508, Florida Statutes, of Florida, Such change was auth	, the abov norized by	e-named corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the app	of changing its re- pointment as regis	gistered stered		
agent. I a	m familiar with, and accept the oblig	ations of, Section 617.0503, Florid	a Statutes	i.	á	lain			
SIGNATURE	X Barren Bro	4077.0	阝	FL NARD	S ROWN 1725	<u>לל</u>	<u>·</u> ·		
12.	Signature, typed or printed name of registered ag	ND DIRECTORS	13.	nt signature require	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS	S IN 12		
TITLE	T OFFICERS A	DELETE	1.1 TITLE			Change	Addition		
NAME	SCNIEDER, PHYLLIS		1.2 NAME	'3	SCHINDLER, PHYLLIS				
	THE ME TO LOT OFFICE AND ALC			TADDRESS	TIO NE 191 ST APT 110		٠,		
STREET ADDRESS	NORTH MIAMI BEACH FL 33179			T-ZIP N	ORTH MIAMIBEACH, FL 331	179			
CITY-ST-ZIP	D DELETE 2				<b>47</b>	☐ Change	Addition		
NAME	BRODY, EMANUEL			Be	ERGER, WILLIAM a- 3-1		•		
STREET ADDRESS	DIODI, CHAROLL			TADORESS 17	BERGER, WILLIAM APT. 306				
CITY-ST-ZIP	1000 112 101 0111221,711 1 010			ST-ZIP NO.	RTH MIAMI BEACH, FL. 3317.	9			
TITLE	D DELETE 3.1			V.	P. 450.42.2	☐ Change	Addition		
NAME	ENDZWEIG, WILLIAM			AC	KERMAN, HERMAN	•	٠.		
STREET ADDRESS	LINDENCIA, TRICLIANI			TADORESS 16	KERMAN, HERMAN TO NE 191 ST HET. 302				
CITY-ST-ZIP				ST-ZIP NC	ORTH MIMMI BEACH, FL 331	79			
TITLE	D	DELETE	4.1 TITLE	10		Change	Addition		
NAME	KAHAN, MENDEL		4. 2 NAME	้ น	VEISER, NORMAN 10-21				
STREET ADDRESS		T. 213	4.3 STREE	TADDRESS /	VEISER, NORMAN 680 N.E. 191 ST APT318	<i>y</i>			
CITY-ST-ZIP	NORTH MIAMI BEACH FL 331		4.4 CITY-S	ST-ZIP N	ORTH HIAM DEACH TL 3317	19			
TITLE	D	DELETE 5.1		D-	TAIRCHEELD ARON	· ☐ Change	Addition		
NAME	LEVY, RABBI HYMAN		5.2 NAMÉ		TAUBENFELD, ARON 150 N.E. 191 ST APT. 320	•			
STREET ADDRESS	NE 464 OTBEET 18T 64	9	5.3 STREE	TADDRESS /7	150 M.C. 171 - 171 - 171 - 171				
CITY-ST-ZIP				ST-ZIP N	ORTH MIAMI BEACH, FL 33	179			
TITLE			6.1 TITLE	D	Davib	Change	Addition		
NAME	ORGEL, NATHAN		6.2 NAME	K	LASIERER, DAVID 150 NE 191 ST APT 23	. F	-		
STREET ADDRESS			6.3 STREE	TADDRESS 1	150 NE 14/ 37 HIT 2	-4			
CITY ST 759	N MIAMI BCH EL 33130		6.4 CITY-5	ST-ZIP /	ORTH HIAM, BEACH FL 3	3179			

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 Statutés. 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, with all other like empowered.