

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001373

FILED
Jul 05, 2006
Secretary of State

Entity Name: BIKUR CHOLIM OF NORTH MIAMI BEACH, INC.

Current Principal Place of Business:

990 N.E. 171ST STREET
N MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

990 N.E. 171ST STREET
N MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: 20-3205734 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ZEMEL, ZELDA
990 N.E. 171ST STREET
N MIAMI BEACH, FL 33162 US

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: AZULAY, JUDY
Address: 1020 N.E. 171ST TERRACE
City-St-Zip: N MIAMI BEACH, FL 33162

Title: VP () Delete
Name: ZEMEL, ZELDA
Address: % 990 N.E. 171ST ST.
City-St-Zip: N MIAMI BEACH, FL 33162

Title: T () Delete
Name: LIFSHUTZ, MORTON
Address: 17240 NE 12 AVE
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: P () Delete
Name: DENNIS, SHERI
Address: 1050 N.E. 170TH TERRACE
City-St-Zip: N MIAMI BEACH, FL 33162

Title: VP () Delete
Name: LIFSHUTZ, YVONNE
Address: 17240 N.E. 12TH AVENUE
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: RS () Delete
Name: NUHOMOVIC, SERENA
Address: 1130 N.E. 173RD STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: MARMOR, MARLENE
Address: 970 NE175TH STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: () Change () Addition
Name:
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 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: MARLENE MARMOR

SECR

07/05/2006

Electronic Signature of Signing Officer or Director

Date