2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001373

FILED Mar 19, 2007 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business: 990 N.E. 171ST STREET N MIAMI BEACH, FL 33162 **Current Mailing Address: New Mailing Address:** 990 N.E. 171ST STREET N MIAMI BEACH, FL 33162 FEI Number: 20-3205734 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ZEMEL, ZELDA 990 N.É. 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete AZULAY, JUDY SHEMESH, ELLEN Name: Name: 1020 N.E. 171ST TERRACE Address: C/O 990 NE 171ST ST. Address: City-St-Zip: N MIAMI BEACH, FL 33162 City-St-Zip: N MIAMI BEACH, FL 33162 Title: Title: PD (X) Change () Addition () Delete ZEMEL, ZELDA Name: AZULAI, JUDY Name: Address: % 990 N.E. 171ST ST. Address: % 990 N.E. 171ST ST. City-St-Zip: N MIAMI BEACH, FL 33162 City-St-Zip: N MIAMI BEACH, FL 33162 Title: () Delete Title: () Change () Addition MARMOR, MARLENE Name: Name: Address: 970 NE175TH STREET Address: City-St-Zip: NORTH MIAMI BEACH, FL 33162 City-St-Zip: Title: (X) Delete Title: () Change () Addition Name: DENNIS, SHERI Name: 1050 N.E. 170TH TERRACE Address: Address: City-St-Zip: N MIAMI BEACH, FL 33162 City-St-Zip: Title: (X) Delete Title: () Change () Addition LIFSHUTZ, YVONNE Name: Name: 17240 N.E. 12TH AVENUE Address: Address: City-St-Zip: NORTH MIAMI BEACH, FL 33162 City-St-Zip: Title: (X) Delete Title: () Change () Addition NUHOMOVIC, SERENA Name: Name: Address: 1130 N.E. 173RD STREET Address: NORTH MIAMI BEACH, FL 33162 City-St-Zip: 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 T 03/19/2007