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 #1. Corporation Name N96000004825 (3)

TZEDAKAH HOUSE, INC.

FILED May 15 1998 8:00am Secretary of State

i indictel dia inten mittl auch	BALL ROLL GRILL GRAN	#1881 (#118 11881 #111 (#21

Principal Place of Business Mailing Address						
7880 N.W. 62ND WAY 7690 N.W. 62ND WAY PARKLAND FL 33067 PARKLAND FL 33067					3. Date Incorporated or Qualified 09/16/1996 4. FEI Number Applied For	
						65-0718687 Not Applicable
	lace of Business	2a. Mailing Address				5. Certificate of Status Desired \$8.75 Additional
21		26				V Fee Required
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
City & State	e	City & State				7. Is this nonprofit corporation a homeowners association?
23		28				☐ Yes ☑ No
Ζιρ	Country	Zip	Cour	ntry		8. This corporation owes or has paid the current year Intangible
24	25	[29]	30			Personal Property Tax due June 30. Yes W No 10. Name and Address of New Registered Agent
	9. Name and Address of Curre	nt Registered Agent		81	Name	10. Name and Address of New Registered Agent
001111	IEDDV		L			
COHN, L. JERRY 4300 N. UNIVERSITY DRIVE, SUITE B-104		l'	82	Street Addres	ss (P.O. Box Number is Not Acceptable)	
	HILL FL 33351	•	ļ.	83		
2.552				84	City	85 Zip Code
					•	FL
office or r	to the provisions of Sections 617.05t egistered agent, or both, in the State m familiar with, and accept the oblig	a of Florida. Such channe was a	uithorized	l hv t	named corpor the corporatio	oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered
SIGNATURE		ALONE ASSESSMENT OF THE PROPERTY OF THE PROPER	Danistana	Acont	signature required	d when reinstating) DATE
12.	Signature, typed or printed name of registered ag OFFICERS AN	ID DIRECTORS	13.	Agent	. signature required	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITI	LE		Change Addition
NAME	CARTER, SUZANNE H .		1.2 NA	ME		
STREET ADDRESS	1561 S. CONGRESS AVE., #	161	1.3 STF	REET A	DDRESS	
CITY-ST-ZIP	DELRAY BEACH FL 33445		1.4 CIT		ZIP	
TITLE	D	☐ DELETE	2 1 TITI			☐ Change ☐ Addition
NAME	KAPLAN, JONATHAN S		2.2 NAI		DODEGO	
STREET ADDRESS	7680 N.W. 62ND WAY				DORESS	
CITY-ST-ZIP TITLE	PARKLAND FL 33067	DELETE	2. 4 CIT		- ZIP	☐ Change ☐ Addition
NAME	SPIEGEL, AARON		3.2 NAI			
STREET ADDRESS	13180 LA CANADA BLVD.				DORESS	
CITY-ST-ZIP	FISHERS IN 46038		3.4. Cf1	TY-ST-	-ZIP	
TITLE		DELETE	4.1 TITI	LE		Change Addition
NAME			4. 2 NA	ME		
STREET ADORESS			4.3 STF	REET AI	DORESS	
CITY-ST-ZIP			4.4 CIT		ZIP	C Ohanna C Addition
TITLE		☐ DELETE	5.1 TITI			Change Addition
NAME			5.2 NAI			
STREET ADDRESS					DDRESS	
CITY-ST-ZIP		DELETE	5.4 CIT 6.1 TIT		7119	☐ Change ☐ Addition
TITLE			6.2 NAI	_		_ Change _ recinion
NAME Street Address					DORESS	
CITY-ST-ZIP			6.4 CIT			
	certify that the information supplied a	with this filing does not qualify for				Section 119.07(3)(i), Florida Statutes. I further certify that the information

nereov cermy that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(1), Florida Statutes. 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 of the juceiver 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, of on an attachment with a faddress.

SIGNATURE: