## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1992

FILED
Feb 02 1998 8:00an
Secretary of State

	1990				
DOCUI	MENT # N9600	0005769 (2)			-
CHABAD OF DEERFIELD BEACH, INC.					
	,				
Principal Plac	e of Business	Mailing Address			[
638 NW38 TERRACE 638 NW 38 TERRACE				3. Date Incorporated or Qualified	
DEERFIELD BEACH FL 33442 DEERFIELD BEACH FL 33442			42	11/12/1996	- ·
		00		4. FEI Number	Applied For
2. Principal P	lace of Business	2a. Mailing Address	<del></del>	65-0706019  5. Certificate of Status Desired	Not Applicable
21		26	<del>,</del>		Fee Required
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
City & State	e	City & State		7. Is this nonprofit corporation a homeow	ners association?
Zip	Country	28	Country	Yes     Nhis corporation owes or has paid the	
24	25		30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registers	ed Agent
			81 Name	<b>*</b>	;==(
GOLDSTEIN, RABBI Z 538 NW 38 TERRACE 5				dress (P.O. Box Number is Not Acceptable)	
	ELD BEACH FL 33442		83		
			84 City	F	85 Zip Code
11. Pursuant	to the provisions of Sections 617.050	02 and 617.1508, Florida Statut	es, the above-named co		
office or r agent, I a	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was a gations of, Section 617.0503, Flo	authorized by the corpor orida Statutes	rporation submits this statement for the purpose ation's board of directors. I hereby accept the a	ppointment as registered
SIGNATURE.	Signature, typed or printed name of registered ag	and title if applicable. (NOT)	E. Registered Agent signature req	kulred when reinstating) DATE	
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	DPT	DELETE	1.1 TITLE		Change Addition
NAME	GOLDSTEIN, RABBI Z		1.2 NAME		<b>{</b> }
STREET ADDRESS	638 NW 38 TERRACE		1.3 STREET ADDRESS	!	Įį
CITY-ST-ZIP	DEERFIELD BEACH FL	DELETE	1.4 CITY-ST-ZIP		Change   Addition
TITLE NAME	DV GOLDSTEIN, MIRIAM	L Otte It	2.1 TITLE 2.2 NAME		Change L Addition
STREET ADDRESS	638 NW 38 TERRACE		2.3 STREET ADDRESS		1
CITY+ST-ZIP	DEERFIELD BEACH FL		2. 4 CITY-ST-ZIP		ļ
TITLE	DS	DELETE	3.1 TITLE		Change Addition
NAME	GOLDSTEIN, ANNA		3.2 NAME	·	)
STREET ADORESS	638 NW 38 TERRACE		3.3 STREET ADDRESS		
CITY-ST-ZIP	DEERFIELD BEACH FL		3.4. CITY-ST-ZIP	<del></del>	
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME STREET ADDRESS			4. 2 NAME	_	1
CITY-ST-ZIP			4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		. }
TITLE		DELETE	5.1 TITLE	<del></del>	Change Addition
NAME		<del>-</del>	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS	į	
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE	· · · · <del>·</del>	DELETE	6.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME			6.2 NAME		į
STREET ADDRESS			6.3 STREET ADORESS		
CITY-ST-ZIP	T. the last terms of the last	21. 12. 62. 4	6.4 CITY-ST-ZIP	in Section 110 07/3/0) Florido Statutos I further	

nereby 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 of 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.

SIGNATURE: