

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003134

FILED
Aug 08, 2007
Secretary of State

Entity Name: RITA AND JEROME J. COHEN FOUNDATION, INC.

Current Principal Place of Business:

319 S.E. 1ST AVENUE
HALLANDALE BEACH, FL 33009 US

New Principal Place of Business:

Current Mailing Address:

319 S.E. 1ST AVENUE
HALLANDALE BEACH, FL 33009 US

New Mailing Address:

FEI Number: 31-1574899 **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:

COHEN, JEROME J
319 S.E. 1ST AVENUE
HALLANDALE BEACH, FL 33009 US

Name and Address of New Registered Agent:

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: PSTD () Delete
Name: COHEN, JEROME J
Address: 319 S.E. 1ST AVENUE
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: VD () Delete
Name: COHEN, RITA
Address: 11111 BISCAYNE BLVD., #227
City-St-Zip: MIAMI, FL 33181

Title: D () Delete
Name: COHEN, LAWRENCE J
Address: 319 S.E. 1ST AVENUE
City-St-Zip: HALLANDALE BEACH, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: JEROME J. COHEN

PSTD

08/08/2007

Electronic Signature of Signing Officer or Director

Date