

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2001 8:00 am
Secretary of State

05-22-2001 90004 030 ****61.25

DOCUMENT # **N97000003507** ✓

1. Entity Name

Albert & Esther Kaufman Foundation, Inc.

Principal Place of Business

Mailing Address

12515 North Kendall Drive
 Suite # 314
 Miami, FL 33186

SAME

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0763952

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Philip Shenkman, Trustee
 12515 North Kendall Drive
 Suite # 314
 Miami, FL 33186

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Philip Shenkman Trustee

4/30/01

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when consulting.)

DATE

FILE NOW:
FEE IS \$51.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
 NAME Trustee
 STREET ADDRESS Philip Shenkman #314
 CITY-STATE-ZIP 12515 N. Kendall Dr, Mia, FL 33186

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

TITLE ☐ Delete
 NAME Trustee
 STREET ADDRESS Murry Zohn
 CITY-STATE-ZIP 6901 SW 147 Avenue, # 2-C Miami, FL 33193

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

TITLE ☐ Delete
 NAME Trustee
 STREET ADDRESS Michael Greenberg
 CITY-STATE-ZIP 14647 SW 18 Court Davie, FL 33325

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

TITLE ☒ Delete
 NAME Trustee
 STREET ADDRESS Esther Kaufman
 CITY-STATE-ZIP 2861 NE 23 Street Ft. Lauderdale, FL 33305

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other lines empowered.

SIGNATURE:

Philip Shenkman Trustee

4/30/01

(305) 271-8585

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Ext 1

CR2E037 (11/00)