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FILED  
May 19 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>	 FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N97000004829 (4)**

1. Corporation Name

**L'CHAIM SOCIETY, INC.**



Principal Place of Business

Mailing Address

~~4005 EL PRADO BLVD.~~  
~~COCONUT GROVE FL 33133~~

~~4005 EL PRADO BLVD.~~  
~~COCONUT GROVE FL 33133~~

3. Date Incorporated or Qualified

**08/21/1997**

4. FEI Number

**65-0805070**

Applied For

Not Applicable

2. Principal Place of Business

**21 3291 Franklin Avenue**

2a. Mailing Address

**26 3291 Franklin Avenue**

5. Certificate of Status Desired ☒

**\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐

**\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**23 Coconut Grove FL**

City & State

**28 Coconut Grove FL**

Zip **24 33133** Country **25**

Zip **29 33133** Country **30**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**A Z REGISTERED AGENT CORPORATION**  
**2801 S. BAYSHORE DR., STE. 1600**  
**MIAMI FL 33133**

81 Name

**Rabbi Yakov Fellig**

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

**4005 El Prado Blvd.**

83

84 City

**Coconut Grove, FL**

85 Zip Code

**33133**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME **D/P Fellig, Yakov**

STREET ADDRESS **4005 El Prado Blvd.**

CITY-ST-ZIP **Coconut Grove, FL 33133**

TITLE ☐ DELETE

NAME **D/S/T Fellig, Gutal**

STREET ADDRESS **4005 El Prado Blvd.**

CITY-ST-ZIP **Coconut Grove, FL 33133**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

**VD**  
**SIMON, EATRAIN**  
**2917 Whitehead Street**  
**Miami FL 33133**

14. 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 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 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:

*Rabbi Yakov Fellig*

, Yakov Fellig, President 3/17/98

(305) 445-5444

CR2E037 (10/97)