

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000064

FILED
Apr 16, 2010
Secretary of State

Entity Name: MIGDAL OHR, INC.

Current Principal Place of Business:

4045 SHERIDAN AVE.,STE.217
MIAMI BEACH, FL 33140

New Principal Place of Business:

4045 SHERIDAN AVE.,
SUITE # 217
MIAMI BEACH, FL 33140

Current Mailing Address:

4045 SHERIDAN AVE.,STE.217
MIAMI BEACH, FL 33140

New Mailing Address:

4045 SHERIDAN AVE.,
SUITE # 217
MIAMI BEACH, FL 33140

FEI Number: 65-0874316

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DONNER, NUCHUM
4045 SHERIDAN AVE.,STE.217
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

DONNER, NUCHUM
4045 SHERIDAN AVE.,
SUITE # 217
MIAMI BEACH, FL 33140 US

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:

04/16/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP
Name: SIMPSER, BERNARD
Address: 7037 WOODMONT WAY
City-St-Zip: TAMARAC, FL 33321

Title: DS
Name: DONNER, NUCHUM
Address: 4045 SHERIDAN AVE.,STE.217
City-St-Zip: MIAMI BEACH, FL 33140

Title: D
Name: JUNGREIS, MEIR
Address: 4101 PINE TREE DRIVE
City-St-Zip: MIAMI BEACH, FL 33140

Title: D
Name: JNNGEIS, NILLIE
Address: 4101 PINE TREE DRIVE
City-St-Zip: MIAMI BEACH, FL 33140

Title: D
Name: KARRO, STEVE
Address: 4010 CHASE AVE.,APT.215
City-St-Zip: MIAMI BEACH, FL 33140

I hereby 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 all other like empowered.

SIGNATURE: NUCHUM DONNER

D

04/16/2010

Electronic Signature of Signing Officer or Director

Date