

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N98000000659

FILED
Jan 28, 2002 8:00 AM
Secretary of State

Entity Name: YESHIVA GEDOLAH RABBINICAL COLLEGE, INC.

Current Principal Place of Business:

1200 ALTON ROAD
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

1200 ALTON ROAD
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 65-0809938 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KORF, BENZION
1200 ALTON ROAD
MIAMI BEACH, FL 33139 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: DP () Delete
Name: KORF, ABRAHAM
Address: 1200 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL 33139

Title: DV () Delete
Name: KORF, BENZION
Address: 1200 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL 33139

Title: DS () Delete
Name: SOSSONKO, YOSEF
Address: 1200 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL 33139

Title: DT () Delete
Name: SCHAPIRO, YEHUDA L
Address: 1200 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: MIRMEELLI, STEWART
Address: 1200 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: KORF, ABRAHAM
Address: 1257 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL 33139

Title: DV (X) Change () Addition
Name: KORF, BENZION
Address: 6100 PINE TREE DR
City-St-Zip: MIAMI BEACH, FL 33140

Title: DS (X) Change () Addition
Name: SOSSONKO, YOSEF
Address: 1207 LENOX AVE.
City-St-Zip: MIAMI BEACH, FL 33139

Title: DT (X) Change () Addition
Name: SCHAPIRO, YEHUDA L
Address: 2040 NORTH BAY ROAD
City-St-Zip: MIAMI BEACH, FL 33139

Title: D (X) Change () Addition
Name: MIRMEELLI, STEWART
Address: 1210 MICHIGAN AVE
City-St-Zip: MIAMI BEACH, FL 33139

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BENZION KORF

_____ Electronic Signature of Signing Officer or Director

DV

01/28/2002

_____ Date