

# 2004 ~~NOT-FOR-PROFIT~~ CORPORATION ANNUAL REPORT (AR)

FILED

Feb 04, 2004 08:00 AM  
Secretary of State

DOCUMENT # N98000006989

1. Entity Name

RACHEL-ITA OHR SHABBAT, INC.



Principal Place of Business

22161 LARKSPUR TRAIL  
BOCA RATON FL 33433

Mailing Address

22161 LARKSPUR TRAIL  
BOCA RATON FL 33433

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

65-0881588

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

KAMINETZKY, GLORIA K  
22161 LARKSPUR TRAIL  
BOCA RATON FL 33433

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25  
Due By May 1, 2004

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME ZEMEL, JUDITH M  
STREET ADDRESS 22200 LARKSPUR TRAIL  
CITY- ST- ZIP BOCA RATON FL 33433-3 ☐ Delete

TITLE PD  
NAME KAMINETZKY, GLORIA L  
STREET ADDRESS 22161 LARKSPUR TRAIL  
CITY- ST- ZIP BOCA RATON FL 33433 ☐ Delete

TITLE VPD  
NAME KAMINETZKY, JERRY  
STREET ADDRESS 22161 LARKSPUR TRAIL  
CITY- ST- ZIP BOCA RATON FL 33433 ☐ Delete

TITLE TD  
NAME BAND, FRANCES  
STREET ADDRESS 7674 CYPRESS CRESCENT  
CITY- ST- ZIP BOCA RATON FL 33433 ☐ Delete

TITLE TD  
NAME BAND, CHANNON  
STREET ADDRESS 7674 CYPRESS CRESCENT  
CITY- ST- ZIP BOCA RATON FL 33433 ☐ Delete

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS U00000035958  
CITY- ST- ZIP 02/06/04-80037-022 61.25

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

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CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 like empowered.

SIGNATURE:

*Channon Band*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/4/04 561-367-1154  
Date Daytime Phone #