

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2001 8:00 am
Secretary of State

02-13-2001 90053 014 ****61.25

DOCUMENT # N99000001283

1. Entity Name
CONGREGATION B'NAI HASHEM, INC.

Principal Place of Business Mailing Address

**1138 POINTE NEWPORT TERRACE
UNIT 212
CASSELBERRY FL 32707** **P.O. BOX 180575
CASSELBERRY FL 32718**

2. Principal Place of Business 3. Mailing Address

1361 Tierra Cirde Suite, Apt. #, etc.

City & State City & State

Winter Park, FL City & State

Zip Country Zip Country

32792 **Seminole**



DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For

59-3569109 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**SILVERMAN, JAY F
1138 POINTE NEWPORT TERR
#212
CASSELBERRY FL 32707**

7. Name and Address of New Registered Agent

Name **Jay F. Silverman**

Street Address (P.O. Box Number is Not Acceptable) **1361 Tierra Cirde**

City **Winter Park** State **FL** Zip Code **32792**

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 **Jay F. Silverman** **Jay F. Silverman** **President** **2/6/2001**

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

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

| | | |
|----------------|--------------------------------------|---------------------------------|
| TITLE | PSTD | <input type="checkbox"/> Delete |
| NAME | SILVERMAN, JAY F | |
| STREET ADDRESS | 1138 POINTE NEWPORT TERR #212 | |
| CITY-ST-ZIP | CASSELBERRY FL 32707 | |
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | EVANS, EUGENIA | |
| STREET ADDRESS | 1138 POINTE NEWPORT TERR #212 | |
| CITY-ST-ZIP | CASSELBERRY FL 32707 | |
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | SILVERMAN, DAVID | |
| STREET ADDRESS | 950 LAUREL OAKS LANE | |
| CITY-ST-ZIP | ORANGE CITY FL 32763 | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | | |
|----------------|------------------------------|--|
| TITLE | PSTD | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | Jay F. Silverman | |
| STREET ADDRESS | 1361 Tierra Cirde | |
| CITY-ST-ZIP | Winter Park, FL 32792 | |
| TITLE | D | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | Eugenia Evans | |
| STREET ADDRESS | 1361 Tierra Cirde | |
| CITY-ST-ZIP | Winter Park, FL 32792 | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| 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)(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 like empowered.

SIGNATURE: **Jay F. Silverman** **2/6/2001** **(407) 767-7502**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)