

2000 UNIFORM BUSINESS REPORT (UBR)

9/13/00-90048-033-\$61.25-\$61.25

DOCUMENT # N99000002001

1. Entity Name

ISRAEL MEDICAL RESEARCH ASSOCIATION USA, INC.

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

00 OCT 23 AM 9:42

Principal Place of Business

230 ROYAL PALM WAY, STE.210
PALM BEACH FL 33480

Mailing Address

230 ROYAL PALM WAY, STE.210
PALM BEACH FL 33480

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

13-6218184

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

HOUGH, JOHN HARRISON ESQ.
249 ROYAL PALM WAY, STE.403
PALM BEACH FL 33480

7. Name and Address of New Registered Agent

Name Sharon Apple
Street Address (P.O. Box Number is Not Acceptable)
230 Royal Palm Way, Suite 210
City Palm Beach FL Zip Code 33480

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

Sharon Apple Director of Development

9/12/00

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

(NOTE: Registered Agent signature required when revalidating)

DATE

FILE NOW: FEE IS \$61.25

After September 13, 2000 min. will be \$236.25

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	Chairman, Regional Scientific Board	☐ Delete
NAME	Neal E. Rothschild, M.D.	
STREET ADDRESS	The Cancer Institute	
CITY-ST-ZIP	1309 North Flagler Drive West Palm Beach, FL 33401	
TITLE	Mrs. Helen G. Hoffman	☐ Delete
NAME	Vice Chairman of the Board	
STREET ADDRESS	150 Bradley Place, #616	
CITY-ST-ZIP	Palm Beach, FL 33480	
TITLE (D)	Chairman, Executive Committee	☐ Delete
NAME	Arnold S. Hoffman	
STREET ADDRESS	249 Royal Palm Way, Suite 403	
CITY-ST-ZIP	Palm Beach, FL 33480	
TITLE	Secretary	☐ Delete
NAME	Rutha Mettler	
STREET ADDRESS	415 Glenbrook Drive	
CITY-ST-ZIP	Atlanta, FL 33462	
TITLE (D)	Treasurer	☐ Delete
NAME	Irving Rom	
STREET ADDRESS	9800 Breakers West Terrace	
CITY-ST-ZIP	West Palm Beach, FL 33411	
TITLE	Vice Chairman, Executive Committee	☐ Delete
NAME	Peter D. Brown	
STREET ADDRESS	P.O. Box 2692	
CITY-ST-ZIP	Palm Beach, FL 33480	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE (D)	Chairman of the Board	☐ Change ☐ Addition
NAME	S. David Leibowitz	
STREET ADDRESS	2295 South Ocean Boulevard, #425	
CITY-ST-ZIP	Palm Beach, FL 33480	
TITLE	Assistant Treasurer	☐ Change ☐ Addition
NAME	Inene G. Ostroff	
STREET ADDRESS	3590 South Ocean Boulevard, #810	
CITY-ST-ZIP	Palm Beach, FL 33480	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ 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:

Sharon Apple

9/8/00

(561) 832 9277

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CP2E037 (5/00)