

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002369

FILED
Feb 18, 2004
Secretary of State

Entity Name: INSTITUTE OF JEWISH KNOWLEDGE & LEARNING, INC.

Current Principal Place of Business:

1835 E HALLANDALE BEACH BLVD
#234
HALLANDALE, FL 33009

New Principal Place of Business:

Current Mailing Address:

1835 E HALLANDALE BEACH BLVD
#234
HALLANDALE, FL 33009

New Mailing Address:

9721 SEA TURTLE DRIVE
PLANTATION, FL 33324

FEI Number: 65-0926061

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LERNER, KIM
9721 SEA TURTLE DR.
PLANTATION, FL 33324 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: LERNER, KIM
Address: 9721 SEA TURTLE DR.
City-St-Zip: PLANTATION, FL 33324

Title: D () Delete
Name: BER, ABRGHAM DR.
Address: 10211 N 72 ND ST.
City-St-Zip: SCOTTSDALE, AZ 85258

Title: DP () Delete
Name: MANN, AKIVA D
Address: 7699 CYPRESS CRESCENT
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: RABBI AKIVA MANN

DP

02/18/2004

Electronic Signature of Signing Officer or Director

Date