2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002502

Apr 28, 2005 Secretary of State

Entity Name: JEWISH MUSEUM OF FLORIDA PROPERTIES, INC.

Current Principal Place of Business: New Principal Place of Business:

301 WASHINGTON AVENUE 301 WASHINGTON AVENUE MIAMI BEACH, FL 33139SIMO N MIAMI BEACH, FL 33139

Current Mailing Address: New Mailing Address:

301 WASHINGTON AVENUE 301 WASHINGTON AVENUE MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33139SIMO N US

FEI Number: 65-1003091 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SIMON, GARY P 9100 SO. DADELAND BLVD. SUITE 504 MIAMI, FL 33156 US

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition GILLER, NORMAN GILLER, NORMAN Name: Name:

301 WASHINGTON AVENUE Address: 301 WASHINGTON AVENUE Address: City-St-Zip: MIAMI BEACH, FL 33139SIMO N City-St-Zip: MIAMI BEACH, FL 33139 US

Title: () Delete Title: (X) Change () Addition

Name: LEVINE, NORMAN Name: LEVINE, NORMAN Address: 301 WASHINGTON AVENUE Address: 301 WASHINGTON AVENUE City-St-Zip: MIAMI BEACH, FL 33139SIMO N City-St-Zip: MIAMI BEACH, FL 33139 US

Title: () Delete Title: (X) Change () Addition

ZERIVITZ, MARCIA Name: ZERIVITZ, MARCIA Name: 301 WASHINGTON AVENUE 301 WASHINGTON AVENUE Address: Address: City-St-Zip: MIAMI BEACH, FL 33139SIMO N City-St-Zip: MIAMI BEACH, FL 33139 US

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: MARCIA ZERIVITZ D 04/28/2005