

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000004237

1. Entity Name

SCHOLARSHIP FUND FOR ETHIOPIAN JEWS, INC.



FILED
Jul 31, 2001 8:00 am
Secretary of State

07-31-2001 90233 007 ****61.25

Principal Place of Business

Mailing Address

C/O SIDNEY HAIFETZ
4740 S. OCEAN BLVD., PH2
HIGHLAND BEACH FL 33487

C/O SIDNEY HAIFETZ
4740 S. OCEAN BLVD., PH2
HIGHLAND BEACH FL 33487



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

90 MARLENE HERZOG

3. Mailing Address

90 MARLENE HERZOG

Suite, Apt. #, etc.

Suite, Apt. #, etc.

2562 W. SARATOGA DRIVE

2562 W. SARATOGA DRIVE

City & State

City & State

COOPER CITY, FL

COOPER CITY, FL

Zip

Country

Zip

Country

33026

USA

33026

USA

4. FEI Number 65-0938714

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

HAIFETZ, SIDNEY
4740 S. OCEAN BLVD., PH2
HIGHLAND BEACH FL 33487

Name MARLENE HERZOG

Street Address (P.O. Box Number is Not Acceptable)

2562 W. SARATOGA DRIVE

City

COOPER CITY

FL

Zip Code

33026

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

Marlene Herzog MARLENE HERZOG SECRETARY

JULY 16, 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

After September 12, 2001, 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 PD
NAME HAIFETZ, SIDNEY
STREET ADDRESS 4740 S OCEAN BLVD APT PH2
CITY-ST-ZIP BOCA RATON FL 33487 ☐ Delete

TITLE EVPD
NAME SHERMAN, EDWIN
STREET ADDRESS 4740 S OCEAN BLVD APT 1105
CITY-ST-ZIP BOCA RATON FL 33487 ☐ Delete

TITLE SD
NAME HERZOG, MARLENE
STREET ADDRESS 2562 W SARATOGA DRIVE
CITY-ST-ZIP COOPER CITY FL 33026 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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CITY-ST-ZIP ☐ Change ☐ Addition

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

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: *Marlene Herzog* MARLENE HERZOG JULY 16, 2001 (954) 433-1585

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