2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 05, 2005
Secretary of State

DOCUMENT# P10625

Entity Name: THE KODESH CONGREGATION (INC.)

Current Principal Place of Business:

17415 NE 9TH COURT
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

17415 NE 9TH COURT
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: 58-1573662 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ANDRON, RABBI MICHAEL
17415 NE 9TH COURT
N. MIAMI BEACH, FL 33162 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:	D	( ) Delete
Name:	ANDRON, MICHAEL,	
Address:	17415 NE 9TH COURT	
City-St-Zip:	N. MIAMI BEACH, FL	
Title:	VD	( ) Delete
Name:	MOSHE, RAAB PHD	
Address:	53 HAGITIT ST	
City-St-Zip:	MAALEH ADUMIM, IS 98390	
Title:	STD	( ) Delete
Name:	CHERNICK, ANDREW,	
Address:	43-A HAGALL ST.	
City-St-Zip:	KFAR SABAR, IS	
Title:	PD	( ) Delete
Name:	GROSSBARD, HARVEY DR,	
Address:	17435 NE 12TH CT	
City-St-Zip:	N. MIAMI BEACH, FL	
Title:	D	( ) Delete
Name:	HEINEMANN, JACK	
Address:	1020 NE 177TH TERRACE	
City-St-Zip:	N MIAMI BEACH, FL 33162 US	

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:		
Title:	PD	(X) Change ( ) Addition
Name:	GROSSBARD, HARVEY DR,	
Address:	PO BOX 1898	
City-St-Zip:	CHASHMONAIM, IS 73127	
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: MICHAEL ANDRON D 07/05/2005

Electronic Signature of Signing Officer or Director — Date