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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jun 10 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000061692 (5)

LITTLE ISRAEL JUDAICA & BOOKS, INC.

Mailing Address Principal Place of Business 7828 N.W. 44TH STREET 7828 N.W. 44TH STREET SUNRISE FL 33317 SUNRISE FL 33351-6206 3. Date Incorporated or Qualified 3a. Date of Last Report 07/19/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For **\$**65-0680280 Not Applicable 21 26 Sulte, Apt. #, etc. Suite. Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 ZID Country Zφ Country This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SIVERIO, E 7179 PEMBROKE ROAD Street Address (P.O. Box Number is Not Acceptable) 82 PEMBROKE PINES FL 33023 83 Zip Code City 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, lyped or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Addition DITE Change 1.13003 TITLE TAL, DEBORAH 1.2 NAME NAME **1245 N.W. 125TH TERRACE** STREET ADDRESS 1.3 STREET ADORESS **SUNRISE FL 33323** 1.4 C(1Y - S1 - Z(P CITY-ST-ZIP DELETE Change Addition TITLE STD 21 TILE TAL, OFIR 2.2 NAME NAME 1245 N.W. 125TH TERRACE STREET ADDRESS 2.3 STREET ADDRESS SUNRISE FL 33323 CITY-ST-ZIP 2. 4 CITY - \$1 - ZIP Change DELETE Addition TITLE 3.1 TITLE 3.2 NAM NAME 3.3 STREET ADDRESS STREET ADDRESS 3 4. C(TY - ST - Z(P CITY-ST-ZIP TITLE DELFTE 4.1 THE ☐ Change Addition 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CHY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 C(TY-ST-Z)P CITY-ST-ZIP Addition DELETE Change TITLE 61 1ITE 6.2 NAME NAME STREET ADDRESS 63 STREET ADDRESS 6.4 CITY+ST-7(P) CITY-ST-ZIP

14. I do 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

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

Information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name