FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

BETH ISRAEL MEMORIAL CHAPEL, INC.

Principal Place of Business 4126 NORLAND AVENUE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

21

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

BURNABY, B.C., CANADA V5G 3S8

4126 NORLAND AVENUE

BURNABY, B.C., CANADA V5G 3S8

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90284 031 ***150.00

\	452568 - 90	284 - 31			
	DO NOT WRIT	TE IN TH	HIS SPACE		
3.	Date Incorporated or Qualifed				
	03/31/98				
4.	FEI Number 65-0824960		Applied	For	
			Not App	olicable	
5.	Certifcate of Status Desired		•	\$8.75 Additional Fee Required	
6.	Election Campaign Financing]	\$5.00 May	Be	

	28		Trust Fund Contribution	Added to Fees	
Country 25	Zip 29	Country 30	This corporation owes the current y Personal Property Tax.	year Intangible ☐ Yes ☐ No	
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
CT CORPORATION SYST) ROAD				
PLANTATION, FL 33324		83 84 C	ty	85 Zip Code	

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 office or 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. Change Addition DELETE TITLE 11TITE PAUL WAGLER 1.2 NAME 4126 NORLAND AVENUE 1.3 STREET ADDRESS STREET ADDRESS BURNABY, B.C., CANADA V5G 3S8 CITY-ST-ZIP 1.4 CITY-ST-ZIP ☐ DELETE Addition ☐ Change 2.1 TITLE TITLE NAME 2.2 NAME JEFFREY L. CASHNER 801 TEAS ROAD 2.3 STREET ADDRESS STREET ADDRESS CONROE, TX 77303 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition DELETE 3.1 TITLE ☐ Change TITLE 3.2 NAME NAME ROBERT A. WEINSTEIN STREET ADORESS 3.3 STREET ADDRESS 24100 NORTH HIGHWAY 45 VERNON HILLS, IL 60061 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE SEAN M. GILCHRIST NAME 4.2 NAME STREET ADDRESS 801 TEAS ROAD 4.3 STREET ADDRESS CONROE, TX 77303 CITY-ST-ZIP 4.4 CITY-ST-ZIP ☐ DELETE 5.1 TITLE ☐ Change ☐ Addition TITLE 5.2 NAME GEORGE M. AMATO NAME 4145-58TH STREET 5.3 STREET ADDRESS STREET ADDRESS WOODSIDE, NY 11377 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 6.1 TITLE Addition ☐ Change TITLE DAS PETER S. HYNDMAN 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 4126 NORLAND AVENUE BURNABY, B.C., CANADA V5G 3S8 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. 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 annual report or supplied annual 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 title receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on all adjectment with an address, with all other like empowered.

SIGNATURE: _

PETER S. HYNDMAN SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 20, 1999 Date

(604) 299-9321

Daytime Phone #

CR2E034 (11/98