

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008783

Entity Name: CHABAD STUDENT CENTER, INC.

Current Principal Place of Business:

935 NW 5TH AVE
BOCA RATON, FL 33432

Current Mailing Address:

935 NW 5TH AVE
BOCA RATON, FL 33432 US

FEI Number: 20-3396643

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LIBEROW, BORUCH SHMUEL
935 NW 5TH AVE
BOCA RATON, FL 33432 US

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

Officer/Director Detail :

Title D
Name LIBEROW, BORUCH SHMUEL RABBI
Address 935 NW 5TH AVE
City-State-Zip: BOCA RATON FL 33432

Title D
Name THALER, RIVKA ROCHELLE
Address 935 NW 5TH AVE
City-State-Zip: BOCA RATON FL 33432

Title T
Name FELLIG, YAKOV RABBI
Address 935 NW 5TH AVE
City-State-Zip: BOCA RATON FL 33432

Title SECR
Name DENBURG, MOSHE RABBI
Address 17950 MILITARY TRAIL
City-State-Zip: BOCA RATON FL 33496

Title OFFI
Name BUKIET, ZALMAN RABBI
Address 17950 MILITARY TRAIL
City-State-Zip: BOCA RATON FL 33496

I hereby 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 all other like empowered.

SIGNATURE: RIVKA ROCHELLE THALER

D

04/19/2014

Electronic Signature of Signing Officer/Director Detail

Date