

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000000412

**Entity Name:** CHABAD LUBAVITCH OUTREACH OF MARGATE, INC.**Current Principal Place of Business:**4485 NW 65TH AVE  
LAUDERHILL, FL 33319**Current Mailing Address:**4485 NW 65TH AVE  
LAUDERHILL, FL 33319 US**FEI Number: 26-4051119****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LAZARUS, DAVID M  
18901 N.E. 29TH AVE  
SUITE 100  
AVENTURA, FL 33180 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, P                        |
| Name            | UNSDORFER, YECHEZKEL YRABBI |
| Address         | 4485 NW 65TH AVE            |
| City-State-Zip: | LAUDERHILL FL 33319         |

|                 |                     |
|-----------------|---------------------|
| Title           | S, T                |
| Name            | SCHAPIRO, RIVKAH    |
| Address         | 4485 NW 65TH AVE    |
| City-State-Zip: | LAUDERHILL FL 33319 |

|                 |                       |
|-----------------|-----------------------|
| Title           | D                     |
| Name            | KLEIN, YOCHANON RABBI |
| Address         | 618 N LUNA CT         |
| City-State-Zip: | HOLLYWOOD FL 33021    |

|                 |                       |
|-----------------|-----------------------|
| Title           | DIRECTOR              |
| Name            | SCHAPIRO, GAVRIEL     |
| Address         | 1429 PRESIDENT STREET |
| City-State-Zip: | BROOKLYN NY 11213     |

|                 |                     |
|-----------------|---------------------|
| Title           | D                   |
| Name            | KATZ, SHOLOM RABBI  |
| Address         | 4933 NW 65TH AVE    |
| City-State-Zip: | LAUDERHILL FL 33319 |

*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: YECHEZKEL UNSDORFER****D. P.****01/30/2022**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date