

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000003518

**Entity Name:** AMERICAN UNIVERSITY INC**Current Principal Place of Business:**150 SE 2ND AVENUE  
SUITE 1110  
MIAMI, FL 33131**Current Mailing Address:**MOUNT ZION  
14166  
JERUSALEM, ISRAEL 911141 IL**FEI Number:** 27-2309244**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**R & P ACCOUNTING & TAXES INC.  
150 SE 2ND AVENUE  
SUITE 1110  
MIAMI, FL 33131 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            PRESIDENT  
Name            COHEN, ZIGMUND ZIEGLER  
                    ROBERTO PHD  
Address        MOUNT ZION  
                    14166  
City-State-Zip: JERUSALEM ISRAEL JERUSALEM  
                    9411100

Title            SECRETARY  
Name            ROTTMAN, TOVA GOLDSTEIN DR.  
Address        MOUNT ZION 6426  
                    6426  
City-State-Zip: JERUSALEM JERUSALEM 91063

Title            PROFESSOR DOCTOR OF CRIMINAL  
                    JUSTICE  
Name            NIKOLIC, RUDOLF  
Address        11070 NOVI BEOGRAD ,  
                    4 SPRAT , STAN 11 ANTIFASTICKE  
                    BORBE 37A  
City-State-Zip: BEOGRAD NOVI BEOGRAD 11070

Title            VP  
Name            GOLDSTEIN, YTZCHAK PHD  
Address        MOUNT ZION 6426  
                    ISRAEL 6426  
City-State-Zip: JERUSALEM JERUSALEM 91063  
  
Title            TREASURER  
Name            HELLER, CHAYM DR.  
Address        MOUNT ZION 6426  
                    6426  
City-State-Zip: JERUSALEM JERUSALEM 91063

*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:** ZIGMUND ZIEGLER ROBERTO COHEN

PRESIDENT

07/03/2019

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date